

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

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Novartis Corporation Political Action Committee

ADDRESS (number and street)

801 Pennsylvania Ave. NW Suite 700

Check if different
than previously
reported. (ACC)

Washington

DC

20004-2608

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00033969

3. IS THIS
REPORTNEW
(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
Year-End 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 (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
09 01 2018

through

M M M / D D D / Y Y Y Y Y Y
09 30 2018

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

O'Neil, Shawn, , ,

Type or Print Name of Treasurer

Signature of Treasurer

O'Neil, Shawn, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 19 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

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 Y
09		01		2018

To:

M M	/	D D	/	Y Y Y Y Y
09		30		2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div>Y Y Y Y Y 2018</div>		<div>115984.18</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>103043.50</div>	
(c) Total Receipts (from Line 19)	<div>19978.10</div>	<div>195653.01</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>123021.60</div>	<div>311637.19</div>
7. Total Disbursements (from Line 31).....	<div>45015.16</div>	<div>233630.75</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div>78006.44</div>	<div>78006.44</div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	



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. 05/2016)

Page 3

Write or Type Committee Name

Novartis Corporation Political Action Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
09 01 2018

To:

M M / D D / Y Y Y Y Y
09 30 2018
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

12415.37

80025.52

(ii) Unitemized

7562.73

110627.49

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

19978.10

190653.01

(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)

19978.10

190653.01

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

5000.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

19978.10

195653.01

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

19978.10

195653.01

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	15.16	130.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	15.16	130.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19500.00	208000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	25500.00	25500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	45015.16	233630.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	45015.16	233630.75

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	19978.10	190653.01
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19978.10	190653.01
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	15.16	130.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15.16	130.75

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

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

FOR LINE NUMBER: PAGE 6 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ackerman Jr., Robert, E.,

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 (for Individual)
NBS

Occupation (for Individual)
Head REFS Alcon & Head REFS Ameri

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118386

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ackerman Jr., Robert, E.,

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 (for Individual)
NBS

Occupation (for Individual)
Head REFS Alcon & Head REFS Amer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191852

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ammon, Brian, S.,

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 (for Individual)
NBS

Occupation (for Individual)
Deputy Head NPMR Alcon & SDZ

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

570.00

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118387

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

53.08

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

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID :

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

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ammon, Brian, S., ,

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 (for Individual)

NBS

Occupation (for Individual)

Deputy Head NPMR Alcon & SDZ

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191853

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Anderson, Kurt, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

AD State Government Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.76

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118388

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Anderson, Kurt, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

AD State Government Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

530.76

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191854

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

150.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Arline, Andrew, , ,

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 (for Individual)
Pharma

Occupation (for Individual)
Regional Sales Director Pittsburgh

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.15

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118849

Amount of Each Receipt this Period

13.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Arline, Andrew, , ,

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 (for Individual)
Pharma

Occupation (for Individual)
Regional Sales Director Pittsburgh

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191738

Amount of Each Receipt this Period

13.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Astley, Glenn, , ,

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 (for Individual)
Pharma

Occupation (for Individual)
Product Manager- P2P Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118850

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

42.70

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

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

FOR LINE NUMBER:
(check only one)

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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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Astley, Glenn, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

Product Manager- P2P Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191739

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barkhausen, Susana, V, ,

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 (for Individual)

Pharma

Occupation (for Individual)

CV2 Sr ABL Miami

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118857

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Barkhausen, Susana, V, ,

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 (for Individual)

Pharma

Occupation (for Individual)

CV2 Sr ABL Miami

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191745

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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

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

FOR LINE NUMBER: PAGE 11 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barnett, Allison, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

AD State Government Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

875.97

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118391

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barnett, Allison, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

AD State Government Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

933.66

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191857

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Barninger, Michael, C, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Director Breast Marketing

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118858

Amount of Each Receipt this Period

17.00

☐ Memo Item

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

132.38

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

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

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

FOR LINE NUMBER: PAGE 12 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barninger, Michael, C, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Director Breast Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191746

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Baron, Neilda, A, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Ex Dir Medical Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118859

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Baron, Neilda, A, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Ex Dir Medical Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191747

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

117.00

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

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

FOR LINE NUMBER: PAGE 13 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Baroni Allmon, Tracy, L, ,

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 (for Individual)

Corporate

Occupation (for Individual)

ED State Public Policy

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118392

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Baroni Allmon, Tracy, L, ,

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 (for Individual)

Corporate

Occupation (for Individual)

ED State Public Policy

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191858

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Billings, Michael, J, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Director - Global Onc. Portfolio Comm.

Receipt For:

☐
☐

Primary

☐

General

Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118870

Amount of Each Receipt this Period

20.00

☐ Memo Item

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Billings, Michael, J, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Director - Global Onc. Portfolio Comm.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191759

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Blair, Edward, J, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Indication Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118876

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Blair, Edward, J, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Indication Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191765

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

43.08

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

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

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

FOR LINE NUMBER: PAGE 15 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Booth, Taylor, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
Director Fed Gov't Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

673.05

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118394

Amount of Each Receipt this Period

96.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Booth, Taylor, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
Director Fed Gov't Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191860

Amount of Each Receipt this Period

96.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Borill, Troy, L, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr. Oncology Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

406.36

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2119089

Amount of Each Receipt this Period

21.63

☐ Memo Item

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

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

213.93

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

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

FOR LINE NUMBER: PAGE 16 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Borill, Troy, L, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Sr. Oncology Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191772

Amount of Each Receipt this Period

21.63

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bortfeld, Daniel, S, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Global Head HR Operational Excellenc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2119090

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bortfeld, Daniel, S, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Global Head HR Operational Excellence

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191773

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

44.71

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:
(check only one)

PAGE 17 OF 138

☒ 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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brooks, Michael, D, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr Oncol Area Sales Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2119100

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brooks, Michael, D, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr Oncol Area Sales Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191783

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bylancik, Angela, D, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Ex Dir BD&L Alliance Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118953

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

90.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bylancik, Angela, D, ,

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 (for Individual)

Pharma

Occupation (for Individual)

Ex Dir BD&L Alliance Mgmt

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191795

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Calabrese, Ashley, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

Assoc Director State Government Affair

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

655.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118395

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Calabrese, Ashley, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

Assoc Director State Government Affair

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

713.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191861

Amount of Each Receipt this Period

57.69

☐ Memo Item

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

165.38

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

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

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

FOR LINE NUMBER: PAGE 19 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Caldwell, Julie, D, ,

Mailing Address One Health Plaza
Ste 725

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pharma

Occupation (for Individual)
Dermatology Executive Sales Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.11

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118956

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Caldwell, Julie, D, ,

Mailing Address One Health Plaza
Ste 725

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pharma

Occupation (for Individual)
Dermatology Executive Sales Specialis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.80

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191798

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Campbell, Kimberley, J, ,

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 (for Individual)
Sandoz Inc.

Occupation (for Individual)
Head Oncology Medical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118811

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

140.38

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

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

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

FOR LINE NUMBER: PAGE 20 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Campbell, Kimberley, J, ,

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 (for Individual)

Sandoz Inc.

Occupation (for Individual)

Head Oncology Medical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191700

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Carl, Kevin, M, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Sr. Global Program Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118425

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Carl, Kevin, M, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Sr. Global Program Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.80

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191805

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

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

48.08

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

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

FOR LINE NUMBER: PAGE 21 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Casserly, Daniel, P, ,

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 (for Individual)

Corporate

Occupation (for Individual)

US Country Head Government Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3653.70

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118396

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Casserly, Daniel, P, ,

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 (for Individual)

Corporate

Occupation (for Individual)

US Country Head Government Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191862

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Christensen-Boner, Barbara, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

Director State Government Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

1211.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118397

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

480.75

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

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

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

FOR LINE NUMBER: PAGE 22 OF 138

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Christensen-Boner, Barbara, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
Director State Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1307.15

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191863

Amount of Each Receipt this Period

96.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clary, Cathryn, M, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Global Head Patient Affairs and Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1463.00

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118438

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clary, Cathryn, M, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Global Head Patient Affairs and Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191818

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

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

250.15

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cohen, Seth, A, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Business Insights - Cardiovascular

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118401

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cohen, Seth, A, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Business Insights - Cardiovascular

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191867

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Colpitts, Scott, G, ,

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 (for Individual)
Novartis Technical Operations

Occupation (for Individual)
Head of Facilities & Utility Maint. (A

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

352.00

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118442

Amount of Each Receipt this Period

22.00

☐ Memo Item

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

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

64.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Colpitts, Scott, G, ,

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 (for Individual)
Novartis Technical Operations

Occupation (for Individual)
Head of Facilities & Utility Maint. (A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191822

Amount of Each Receipt this Period

22.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Conley, Michael, A, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Vice President Trade Ops & Analytics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118443

Amount of Each Receipt this Period

23.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Conley, Michael, A, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Vice President Trade Ops & Analytics

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191823

Amount of Each Receipt this Period

23.08

☐ Memo Item

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

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

68.16

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 138

(check only one)

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Connors, Elenora, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
Director Fed Gov't Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1057.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118402

Amount of Each Receipt this Period

96.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Connors, Elenora, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
Director Fed Gov't Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191868

Amount of Each Receipt this Period

96.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Conoshenti, Joseph, J, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Director Strat. Market Access RD

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118445

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

222.30

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

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

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

FOR LINE NUMBER: PAGE 26 OF 138

(check only one)

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Conoshenti, Joseph, J, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Director Strat. Market Access RD

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2018

Transaction ID : A2018-2191825

Amount of Each Receipt this Period

30.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Consier, Kirby, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

AD State Government Affairs

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

985.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2018

Transaction ID : A2018-2118403

Amount of Each Receipt this Period

57.69

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Consier, Kirby, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

AD State Government Affairs

Receipt For:

☐
☐

Primary

☐

General

Other (specify)

Aggregate Year-to-Date ▼

1043.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2018

Transaction ID : A2018-2191869

Amount of Each Receipt this Period

57.69

☐

Memo Item

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

145.38

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

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

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

FOR LINE NUMBER: PAGE 27 OF 138

(check only one)

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Coombs, Seth, , ,

Mailing Address 350 Massachusetts Avenue

City
Cambridge

State
MA

Zip Code
02139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
VP Oncology and Injectable Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

876.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118813

Amount of Each Receipt this Period

46.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Coombs, Seth, , ,

Mailing Address 350 Massachusetts Avenue

City
Cambridge

State
MA

Zip Code
02139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
VP Oncology and Injectable Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191702

Amount of Each Receipt this Period

46.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Coraggio, Ryan, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oncology

Occupation (for Individual)
Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118462

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

117.30

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 28 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Coraggio, Ryan, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Oncology

Occupation (for Individual)

Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191829

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Corcoran, Mary, E, ,

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 (for Individual)

Oncology

Occupation (for Individual)

MSL Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.23

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118463

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Corcoran, Mary, E, ,

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 (for Individual)

Oncology

Occupation (for Individual)

MSL Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

294.23

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191830

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

50.00

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

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

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Couture, Eric, C, ,

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 (for Individual)

Global Drug Development

Occupation (for Individual)

Head RA GDD Neuroscience

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 14 / 2018

Transaction ID : A2018-2118468

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Couture, Eric, C, ,

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 (for Individual)

Global Drug Development

Occupation (for Individual)

Head RA GDD Neuroscience

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 28 / 2018

Transaction ID : A2018-2191881

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cross, Jonra, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

Dir Strategy & Communications (Ophtha

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

288.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 14 / 2018

Transaction ID : A2018-2118472

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

136.15

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cross, Jonra, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

Dir Strategy & Communications (Ophtha

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191885

Amount of Each Receipt this Period

96.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cullen, Thomas, G, ,

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 (for Individual)
Sandoz Inc.

Occupation (for Individual)
Advisor Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118814

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cullen, Thomas, G, ,

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 (for Individual)
Sandoz Inc.

Occupation (for Individual)
Advisor Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.80

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191703

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

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

119.23

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

Use separate schedule(s)
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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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Daugherty, Mark, , ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr Oncology Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118476

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Daugherty, Mark, , ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr Oncology Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191889

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Deason, Terry, H, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr. Director SA Research Networks

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118963

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

50.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Deason, Terry, H, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Sr. Director SA Research Networks

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191898

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Degner, Clinton, D, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Regional Account Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118964

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Degner, Clinton, D, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Regional Account Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

230.80

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191899

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

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

43.08

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dixon, Dwayne, T, ,

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 (for Individual)
Alcon

Occupation (for Individual)
Director Market Development HQ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2119042

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Douglas, Alastair, M, ,

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 (for Individual)
Alcon

Occupation (for Individual)
Director US Surgical Sales Training

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2119043

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Douglas, Alastair, M, ,

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 (for Individual)
Alcon

Occupation (for Individual)
Director US Surgical Sales Training

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191590

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

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

73.08

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Esquea, Alison, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
DirectorSandoz Health Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118815

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Esquea, Alison, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
DirectorSandoz Health Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191704

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ewalt, Judith, J, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr Oncol Area Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

219.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118985

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

71.54

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

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ewalt, Judith, J, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr Oncol Area Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191920

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fairchild, Michael, E, ,

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 (for Individual)
Alcon

Occupation (for Individual)
Head IRIS Bus Process Transformation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.22

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2119044

Amount of Each Receipt this Period

15.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fairchild, Michael, E, ,

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 (for Individual)
Alcon

Occupation (for Individual)
Head IRIS Bus Process Transformation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

307.60

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191591

Amount of Each Receipt this Period

15.38

☐ Memo Item

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

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

42.30

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

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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Farber, Leo, A, ,

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 (for Individual)

Corporate

Occupation (for Individual)

Exec Dir Fed Govt Affairs

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118407

Amount of Each Receipt this Period

95.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Farber, Leo, A, ,

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 (for Individual)

Corporate

Occupation (for Individual)

Exec Dir Fed Govt Affairs

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191873

Amount of Each Receipt this Period

95.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fellers, Thomas, S, ,

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 (for Individual)

Pharma

Occupation (for Individual)

Head Med Comms & FM Capabilities

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118987

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

240.00

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

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

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fellers, Thomas, S, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Head Med Comms & FM Capabilities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191922

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fletcher, Tiffany, , ,

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 (for Individual)
Sandoz Inc.

Occupation (for Individual)
Exec. Dir. Gov't. Affairs Biosimilars

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.45

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118816

Amount of Each Receipt this Period

96.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fletcher, Tiffany, , ,

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 (for Individual)
Sandoz Inc.

Occupation (for Individual)
Exec. Dir. Gov't. Affairs Biosimilars

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191705

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

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

242.30

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Foster, Matthew, C, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Derm Sales Regional Director- Central

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118993

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Foster, Matthew, C, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Derm Sales Regional Director- Central

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191928

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Freeland, Jon, S, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr. Oncology Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

237.50

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118994

Amount of Each Receipt this Period

12.50

☐ Memo Item

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

35.58

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Freeland, Jon, S, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr. Oncology Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191929

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fry, Amy, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
VP US Country Head Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118382

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fry, Amy, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
VP US Country Head Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191848

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

112.50

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gaudin, David, E, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Oncology Sr Specialist

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2119001

Amount of Each Receipt this Period

15.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gaudin, David, E, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Oncology Sr Specialist

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191936

Amount of Each Receipt this Period

15.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gentry, Michael, L, ,

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 (for Individual)

NBS

Occupation (for Individual)

Svc Del & Ops Lead Connectivity

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

1463.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118409

Amount of Each Receipt this Period

77.00



Memo Item

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

107.00

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

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gentry, Michael, L, ,

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 (for Individual)
NBS

Occupation (for Individual)
Svc Del & Ops Lead Connectivity

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191875

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goldfarb, Steven, L, ,

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 (for Individual)
Pharma

Occupation (for Individual)
VP Legal Section Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1463.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2119013

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Goldfarb, Steven, L, ,

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 (for Individual)
Pharma

Occupation (for Individual)
VP Legal Section Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191948

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

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

231.00

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gorcz, Damon, , ,

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 (for Individual)
Pharma

Occupation (for Individual)
Specialty Area Business Leader II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2119015

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gorcz, Damon, , ,

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 (for Individual)
Pharma

Occupation (for Individual)
Specialty Area Business Leader II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191950

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Grande, Nancy, J, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Sr Global Program Safety Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2119017

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

80.00

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

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

FOR LINE NUMBER: PAGE 43 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Grande, Nancy, J, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Sr Global Program Safety Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191952

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Grzegorzewski, Kris, , ,

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 (for Individual)
Oncology

Occupation (for Individual)
VP USOM Solid Tumors Franchise

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2119022

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Grzegorzewski, Kris, , ,

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 (for Individual)
Oncology

Occupation (for Individual)
VP USOM Solid Tumors Franchise

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191957

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

130.00

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

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

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

FOR LINE NUMBER:
(check only one)

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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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Guidi, Joseph, M, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr. Director Commercial Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2119024

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Guidi, Joseph, M, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr. Director Commercial Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191959

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Guilbault, Matthew, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
AD State Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

307.68

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118412

Amount of Each Receipt this Period

57.69

☐ Memo Item

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

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

97.69

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Guilbault, Matthew, , ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CorporateOccupation (for Individual)
AD State Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2018

Transaction ID : A2018-2191644

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gulick, David, E, ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PharmaOccupation (for Individual)
Director New Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2018

Transaction ID : A2018-2119025

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gulick, David, E, ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PharmaOccupation (for Individual)
Director New Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2018

Transaction ID : A2018-2191960

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

117.69

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Habel, Kurt, , ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PharmaOccupation (for Individual)
Goaling Design and Analytics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118414

Amount of Each Receipt this Period

23.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Habel, Kurt, , ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PharmaOccupation (for Individual)
Goaling Design and Analytics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191646

Amount of Each Receipt this Period

23.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Haberthur, Charles, L, ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PharmaOccupation (for Individual)
CV1 SPEC - SAN ANTONIO W TX

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2119026

Amount of Each Receipt this Period

12.50

☐ Memo Item

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

58.66

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

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

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

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Haberthur, Charles, L, ,

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 (for Individual)
Pharma

Occupation (for Individual)
CV1 SPEC - SAN ANTONIO W TX

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191961

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hagan, Laura, A, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Global Head Clinical Disclosure Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2119028

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hagan, Laura, A, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Global Head Clinical Disclosure Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.80

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191963

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

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

35.58

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

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

FOR LINE NUMBER: PAGE 48 OF 138
(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hallen, Paul, R, ,

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 (for Individual)

Alcon

Occupation (for Individual)

Global Head VITRet & Glaucoma

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.22

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2119048

Amount of Each Receipt this Period

15.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hallen, Paul, R, ,

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 (for Individual)

Alcon

Occupation (for Individual)

Global Head VITRet & Glaucoma

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.60

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191595

Amount of Each Receipt this Period

15.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Haller, Sarah, E, ,

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 (for Individual)

Corporate

Occupation (for Individual)

VP Intl Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1463.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118415

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

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

107.76

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

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

FOR LINE NUMBER: PAGE 49 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Haller, Sarah, E, ,

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 (for Individual)
Corporate

Occupation (for Individual)
VP Intl Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191647

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hayden, Kathy-Jo, B, ,

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 (for Individual)
Corporate

Occupation (for Individual)
ED Federal Public Policy&Reimburseme

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1225.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118416

Amount of Each Receipt this Period

115.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hayden, Kathy-Jo, B, ,

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 (for Individual)
Corporate

Occupation (for Individual)
ED Federal Public Policy&Reimburseme

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1340.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191648

Amount of Each Receipt this Period

115.00

☐ Memo Item

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

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

307.00

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

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

FOR LINE NUMBER: PAGE 50 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hellberg, Mark, R, ,

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 (for Individual)

NIBR

Occupation (for Individual)

Executive Director Chemical Technolog

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118682

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hellberg, Mark, R, ,

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 (for Individual)

NIBR

Occupation (for Individual)

Executive Director Chemical Technolog

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2192349

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Herpin, Misty, B, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Sr Oncology Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118497

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

115.00

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

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

FOR LINE NUMBER: PAGE 51 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Herpin, Misty, B, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Sr Oncology Specialist

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191982

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hilkert, Robert, J, ,

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 (for Individual)

Global Drug Development

Occupation (for Individual)

Global Program Clinical Head

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

438.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118500

Amount of Each Receipt this Period

23.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hilkert, Robert, J, ,

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 (for Individual)

Global Drug Development

Occupation (for Individual)

Global Program Clinical Head

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

461.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191985

Amount of Each Receipt this Period

23.08

☐ Memo Item

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

61.16

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

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

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

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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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hill, Holli, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
AD State Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118418

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hill, Holli, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
AD State Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191650

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hohenwarter, John, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
AD State Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118419

Amount of Each Receipt this Period

57.69

☐ Memo Item

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

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

99.69

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

Use separate schedule(s)
for 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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hohenwarter, John, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

AD State Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191651

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hokanson, William, C, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Director Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118503

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hokanson, William, C, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Director Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191988

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

87.69

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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 (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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hughes, Donald, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

Director State Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2018

Transaction ID : A2018-2118421

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hughes, Donald, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

Director State Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2018

Transaction ID : A2018-2191653

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hughes, Gene, M, ,

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 (for Individual)

Oncology

Occupation (for Individual)

AD-Regional Acct. Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2018

Transaction ID : A2018-2118511

Amount of Each Receipt this Period

12.00

☐ Memo Item

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

72.00

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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☒ 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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hughes, Gene, M, ,

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 (for Individual)

Oncology

Occupation (for Individual)

AD-Regional Acct. Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191996

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hughson, Melody, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

ED Federal Public Policy & Reimburserr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118422

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hughson, Melody, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

ED Federal Public Policy & Reimburserr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191654

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

112.00

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

Use separate schedule(s)
for 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hyland, Carlos, , ,

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 (for Individual)

Sandoz Inc.

Occupation (for Individual)

BPA Head - Sandoz LatAm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118809

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hyland, Carlos, , ,

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 (for Individual)
Sandoz Inc.

Occupation (for Individual)
BPA Head - Sandoz LatAm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191698

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jarvis, Edgar, L, ,

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 (for Individual)
Pharma

Occupation (for Individual)
CV2 Sr ABL - HOUSTON

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

306.85

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118546

Amount of Each Receipt this Period

16.15

☐ Memo Item

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

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

46.15

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jarvis, Edgar, L, ,

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 (for Individual)

Pharma

Occupation (for Individual)

CV2 Sr ABL - HOUSTON

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2192005

Amount of Each Receipt this Period

16.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Joines, Mark, A, ,

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 (for Individual)

Pharma

Occupation (for Individual)

Sr Inflammatory Account Mgr

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118553

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Joines, Mark, A, ,

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 (for Individual)

Pharma

Occupation (for Individual)

Sr Inflammatory Account Mgr

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2192012

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

46.15

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

Use separate schedule(s)
for 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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jones, Heather, , ,

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 (for Individual)
Oncology

Occupation (for Individual)
AD-Regional Acct. Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118556

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jones, Heather, , ,

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 (for Individual)
Oncology

Occupation (for Individual)
AD-Regional Acct. Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192015

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kamal, Tawfik, , ,

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 (for Individual)
Oncology

Occupation (for Individual)
VP-Glb Head of Bus. Exc & Oper

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118560

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

80.00

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

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

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

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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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kamal, Tawfik, , ,

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 (for Individual)

Oncology

Occupation (for Individual)

VP-Glb Head of Bus. Exc & Oper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192019

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kamos, Dean, B, ,

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 (for Individual)
Oncology

Occupation (for Individual)

Head-FF Execution & Effectiveness

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118424

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kamos, Dean, B, ,

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 (for Individual)
Oncology

Occupation (for Individual)

Head-FF Execution & Effectiveness

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191656

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

100.00

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

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

FOR LINE NUMBER: PAGE 60 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kan, Sarah, G, ,

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 (for Individual)
Corporate

Occupation (for Individual)
Director State Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1463.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118447

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kan, Sarah, G, ,

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 (for Individual)
Corporate

Occupation (for Individual)
Director State Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191657

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Karlsons, Erik, L, ,

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 (for Individual)
Pharma

Occupation (for Individual)
NS Sr Area Business Leader - Washing

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

263.15

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118564

Amount of Each Receipt this Period

13.85

☐ Memo Item

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

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

167.85

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Karlsons, Erik, L, ,

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 (for Individual)

Pharma

Occupation (for Individual)

NS Sr Area Business Leader - Washing

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

277.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192023

Amount of Each Receipt this Period

13.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kelson, Carey, P, ,

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 (for Individual)

Alcon

Occupation (for Individual)

Global Lead Clinical Operations

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191601

Amount of Each Receipt this Period

10.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kendrick, Lisa, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

Specialty Area Business Leader II

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118568

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

39.27

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
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kendrick, Lisa, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

Specialty Area Business Leader II

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192027

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kendris, Thomas, N, ,

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 (for Individual)

Corporate

Occupation (for Individual)

President Novartis Corp & US Cntry Pr

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118384

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kendris, Thomas, N, ,

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 (for Individual)

Corporate

Occupation (for Individual)

President Novartis Corp & US Cntry Pre

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191850

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

215.00

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

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

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

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kettler III, Edward, W, ,

Mailing Address 6201 South Freeway

City
Fort WorthState
TXZip Code
76134-2001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NBS

Occupation (for Individual)

Domain Architect Generics & Biosimilar

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118448

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kettler III, Edward, W, ,

Mailing Address 6201 South Freeway

City
Fort WorthState
TXZip Code
76134-2001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NBS

Occupation (for Individual)

Domain Architect Generics & Biosimilar

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191658

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kincaid, Michael, C, ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Oncology

Occupation (for Individual)

ED Oncology Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

266.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118571

Amount of Each Receipt this Period

14.04

☐ Memo Item

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

56.04

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

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

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kincaid, Michael, C, ,

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 (for Individual)
Oncology

Occupation (for Individual)
ED Oncology Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192030

Amount of Each Receipt this Period

14.04

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Knewtson, Chad, , ,

Mailing Address 4169 58th Street South

City
Fargo

State
ND

Zip Code
58104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pharma

Occupation (for Individual)
Cardiovascular Area Business L

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118577

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Knewtson, Chad, , ,

Mailing Address 4169 58th Street South

City
Fargo

State
ND

Zip Code
58104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pharma

Occupation (for Individual)
Cardiovascular Area Business L

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192037

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

44.04

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kowalski, Robert, W, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Global Head RA US Head Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

876.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118583

Amount of Each Receipt this Period

46.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kowalski, Robert, W, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Global Head RA US Head Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192043

Amount of Each Receipt this Period

46.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Krayacich, John, M, ,

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 (for Individual)
Pharma

Occupation (for Individual)
VP Head NPC Strategic Plng & BD & Lic

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118584

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

122.30

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Krayacich, John, M, ,

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 (for Individual)

Pharma

Occupation (for Individual)

VP Head NPC Strategic Plng & BD & Li

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192044

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kuenzel, Andrea, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

Medical Science Liaison Assoc Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118588

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kuenzel, Andrea, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

Medical Science Liaison Assoc Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

445.46

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192048

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

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

89.46

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

Use separate schedule(s)
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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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Landrus, Francis, C, ,

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 (for Individual)

Global Drug Development

Occupation (for Individual)

Senior Global Program Project Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118595

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Landrus, Francis, C, ,

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 (for Individual)

Global Drug Development

Occupation (for Individual)

Senior Global Program Project Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192055

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lawrence, Todd, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

Associate Director Systems of Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118601

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lawrence, Todd, , ,

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 (for Individual)
Pharma

Occupation (for Individual)
Associate Director Systems of Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192061

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Leas, Leigh Anne, A, ,

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 (for Individual)
Corporate

Occupation (for Individual)
VP and U.S. Country Head Public Polic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118451

Amount of Each Receipt this Period

145.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Leas, Leigh Anne, A, ,

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 (for Individual)
Corporate

Occupation (for Individual)
VP and U.S. Country Head Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191661

Amount of Each Receipt this Period

145.00

☐ Memo Item

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

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

340.00

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

Use separate schedule(s)
for 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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Leatherman, Nancy, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

NS Sr Area Business Leader - Denver

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118603

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Leatherman, Nancy, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

NS Sr Area Business Leader - Denver

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192063

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lehman, Brian, , ,

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 (for Individual)

Sandoz Inc.

Occupation (for Individual)

Dir Medical Acc Mngmt & Strategic Alli

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

288.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118819

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

126.15

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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☒ 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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lehman, Brian, , ,

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 (for Individual)

Sandoz Inc.

Occupation (for Individual)

Dir Medical Acc Mngmt & Strategic Alli

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191708

Amount of Each Receipt this Period

96.15



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lennon, David, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

President AveXis

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118452

Amount of Each Receipt this Period

100.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lennon, David, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

President AveXis

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191662

Amount of Each Receipt this Period

100.00



Memo Item

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

296.15

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
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lloyd, Richard, , ,

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 (for Individual)

Oncology

Occupation (for Individual)

Global Head Marketing Value & Access

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

876.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118619

Amount of Each Receipt this Period

46.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lloyd, Richard, , ,

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 (for Individual)

Oncology

Occupation (for Individual)

Global Head Marketing Value & Access

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192079

Amount of Each Receipt this Period

46.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lockwood, Jeffrey, W, ,

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 (for Individual)

NIBR

Occupation (for Individual)

Head NIBR Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

438.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118775

Amount of Each Receipt this Period

23.08

☐ Memo Item

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

115.38

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

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

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

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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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lockwood, Jeffrey, W.,

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 (for Individual)

NIBR

Occupation (for Individual)

Head NIBR Communications

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

461.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192351

Amount of Each Receipt this Period

23.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lolos, Konstantine, G.,

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 (for Individual)
Oncology

Occupation (for Individual)

Sr Oncol Area Sales Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

266.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118620

Amount of Each Receipt this Period

14.04

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lolos, Konstantine, G.,

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 (for Individual)
Oncology

Occupation (for Individual)

Sr Oncol Area Sales Manager

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192080

Amount of Each Receipt this Period

14.04

☐ Memo Item

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

51.16

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

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

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

FOR LINE NUMBER: PAGE 73 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lund, Paul, O, ,

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 (for Individual)

Alcon

Occupation (for Individual)

Assoc Dir Glb Ops Excellence

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191609

Amount of Each Receipt this Period

10.42



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lusso, Steven, J, ,

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 (for Individual)

Pharma

Occupation (for Individual)

Senior Area Business Leader MS Denv

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118527

Amount of Each Receipt this Period

21.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lusso, Steven, J, ,

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 (for Individual)

Pharma

Occupation (for Individual)

Senior Area Business Leader MS Denve

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192091

Amount of Each Receipt this Period

21.00



Memo Item

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

52.42

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

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

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

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mac Askill, David, T, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Cardiovascular Area Business Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118530

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mac Askill, David, T, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Cardiovascular Area Business Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192094

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MacKay, Kimberly, A, ,

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 (for Individual)
NBS

Occupation (for Individual)
Head Legal and Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

219.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118455

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

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

34.62

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

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

FOR LINE NUMBER: PAGE 75 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. MacKay, Kimberly, A, ,

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 (for Individual)

NBS

Occupation (for Individual)

Head Legal and Compliance

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191665

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Manolios, Frank, , ,

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 (for Individual)
Oncology

Occupation (for Individual)

Sr Oncology Sales Specialist

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118537

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Manolios, Frank, , ,

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 (for Individual)
Oncology

Occupation (for Individual)

Sr Oncology Sales Specialist

Receipt For:

☐
☐

Primary

☐

General

Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192101

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

41.54

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

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

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

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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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Marinac, Jacqueline, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

MSL Associate Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118539

Amount of Each Receipt this Period

15.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Marinac, Jacqueline, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

MSL Associate Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2192103

Amount of Each Receipt this Period

15.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Matthews, William, R, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Sr Oncol Area Sales Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

480.40

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118337

Amount of Each Receipt this Period

25.59



Memo Item

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

55.59

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

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

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

FOR LINE NUMBER: PAGE 77 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Matthews, William, R, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr Oncol Area Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192110

Amount of Each Receipt this Period

25.59

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mc Laughlin, Cynthia, A, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Area VP Cardiovascular Sales East

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118343

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mc Laughlin, Cynthia, A, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Area VP Cardiovascular Sales East

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192116

Amount of Each Receipt this Period

12.50

☐ Memo Item

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

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

50.59

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

Use separate schedule(s)
for 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mc Leer, Arlene, J, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Junior Global Regulatory Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118345

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mc Leer, Arlene, J, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Junior Global Regulatory Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2192118

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McGough, Edward, D, ,

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 (for Individual)
Alcon

Occupation (for Individual)
SVP Global Mfg & Tech Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2192.22

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2119066

Amount of Each Receipt this Period

115.38

☐ Memo Item

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

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

145.38

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

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

FOR LINE NUMBER:
(check only one)

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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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. McGough, Edward, D, ,

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 (for Individual)
Alcon

Occupation (for Individual)
SVP Global Mfg & Tech Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191613

Amount of Each Receipt this Period

115.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McGowan, Joseph, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
Exec Dir Fed Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1549.95

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118456

Amount of Each Receipt this Period

96.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McGowan, Joseph, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
Exec Dir Fed Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1646.10

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191666

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

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

307.68

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

Use separate schedule(s)
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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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McKenna, Edward, J, ,

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 (for Individual)
Oncology

Occupation (for Individual)
AD-Regional Acct. Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.15

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118347

Amount of Each Receipt this Period

13.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McKenna, Edward, J, ,

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 (for Individual)
Oncology

Occupation (for Individual)
AD-Regional Acct. Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2192120

Amount of Each Receipt this Period

13.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McNulty, Bruce, , ,

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 (for Individual)
Pharma

Occupation (for Individual)
CV1 SR ABL - MASSACHUSETTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118348

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

42.70

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

Use separate schedule(s)
for 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McNulty, Bruce, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

CV1 SR ABL - MASSACHUSETTS

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2192121

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mennilli, David, , ,

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 (for Individual)

Sandoz Inc.

Occupation (for Individual)

Director Key Customers

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

570.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118822

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Mennilli, David, , ,

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 (for Individual)

Sandoz Inc.

Occupation (for Individual)

Director Key Customers

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191711

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
for 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Meyer, Stephanie, , ,

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 (for Individual)
Pharma

Occupation (for Individual)
CV2 ABL I - Pittsburgh

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118354

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Meyer, Stephanie, , ,

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 (for Individual)
Pharma

Occupation (for Individual)
CV2 ABL I - Pittsburgh

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2192127

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Millard, Susan, J, ,

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 (for Individual)
Alcon

Occupation (for Individual)
Head HR Alcon R&D

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118336

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

55.00

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

Use separate schedule(s)
for 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Millard, Susan, J, ,

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 (for Individual)

Alcon

Occupation (for Individual)

Head HR Alcon R&D

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191641

Amount of Each Receipt this Period

25.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Miller, Donald, J, ,

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 (for Individual)

Pharma

Occupation (for Individual)

Dir Customer Mktg

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118356

Amount of Each Receipt this Period

11.54



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Miller, Donald, J, ,

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 (for Individual)

Pharma

Occupation (for Individual)

Dir Customer Mktg

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192129

Amount of Each Receipt this Period

11.54



Memo Item

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

48.08

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

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

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

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Moore, Stacey, L.,

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 (for Individual)
Pharma

Occupation (for Individual)
Resp Integrated Account Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.55

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118363

Amount of Each Receipt this Period

23.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Moore, Stacey, L.,

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 (for Individual)
Pharma

Occupation (for Individual)
Resp Integrated Account Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

469.23

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192136

Amount of Each Receipt this Period

23.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mui-Lipnik, Shelly, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
Exec Dir Fed Govt Affairs & Tax Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1642.25

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118781

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

143.51

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

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

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mui-Lipnik, Shelly, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

Exec Dir Fed Govt Affairs & Tax Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1738.40

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191670

Amount of Each Receipt this Period

96.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mullins, Anthony, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

NS Sr Area Business Leader - Dallas

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118885

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mullins, Anthony, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

NS Sr Area Business Leader - Dallas

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2192142

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

126.15

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Murthy, Narashima, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NBS

Occupation (for Individual)
Enterprise Application Archite

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118782

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Murthy, Narashima, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NBS

Occupation (for Individual)
Enterprise Application Archite

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191671

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Neylon, Thomas, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
VP & Head Tax for Int IP TP M&A

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118783

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

80.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Neylon, Thomas, , ,

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 (for Individual)

Corporate

Occupation (for Individual)

VP & Head Tax for Int IP TP M&A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191672

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Nguyen, An, V, ,

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 (for Individual)

NBS

Occupation (for Individual)

Service Operations Manager (F&P IT)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118784

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Nguyen, An, V, ,

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 (for Individual)

NBS

Occupation (for Individual)

Service Operations Manager (F&P IT)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.80

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191673

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

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

73.08

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

Use separate schedule(s)
for 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Nobles, Sharon, L, ,

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 (for Individual)

Pharma

Occupation (for Individual)

Dermatology Executive Sales Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118902

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Nobles, Sharon, L, ,

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 (for Individual)

Pharma

Occupation (for Individual)

Dermatology Executive Sales Specialis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192159

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'Neil, Shawn, , ,

Mailing Address 608 Fifth Avenue

City

New York

State

NY

Zip Code

10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Head Federal Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3284.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118785

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

215.38

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

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

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

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

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

NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'Neil, Shawn, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Head Federal Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3476.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191674

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Olmstead, Sharon, N, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)

Head RA & Development Policy GDD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118909

Amount of Each Receipt this Period

23.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Olmstead, Sharon, N, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)

Head RA & Development Policy GDD

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192166

Amount of Each Receipt this Period

23.08

☐ Memo Item

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

238.46

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Osten, Craig, S, ,

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 (for Individual)

Sandoz Inc.

Occupation (for Individual)

Vice President CFO North America

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118824

Amount of Each Receipt this Period

23.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Osten, Craig, S, ,

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 (for Individual)

Sandoz Inc.

Occupation (for Individual)

Vice President CFO North America

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191713

Amount of Each Receipt this Period

23.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Oxner, Serafina, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

Ex Dir Healthcare Contract Adm

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

438.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118913

Amount of Each Receipt this Period

23.08

☐ Memo Item

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

69.24

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

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

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Oxner, Serafina, , ,

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 (for Individual)
Pharma

Occupation (for Individual)
Ex Dir Healthcare Contract Adm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.60

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2192170

Amount of Each Receipt this Period

23.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Palumbo, Joseph, S, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Associate Director Org Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118918

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Palumbo, Joseph, S, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Associate Director Org Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.80

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2192175

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

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

46.16

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

Use separate schedule(s)
for 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Parker, Melissa, A, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Regional Dir Acct Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.15

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118919

Amount of Each Receipt this Period

13.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Parker, Melissa, A, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Regional Dir Acct Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2192176

Amount of Each Receipt this Period

13.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Phipps, Candice, C, ,

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 (for Individual)
Corporate

Occupation (for Individual)
Director State Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2155.00

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118787

Amount of Each Receipt this Period

115.00

☐ Memo Item

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

142.70

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

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

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

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Phipps, Candice, C, ,

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 (for Individual)

Corporate

Occupation (for Individual)

Director State Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2270.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191676

Amount of Each Receipt this Period

115.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Phyne, Bethany, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

CV2 SR SPEC - INDIANAPOLIS N IN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.73

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118932

Amount of Each Receipt this Period

7.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Phyne, Bethany, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

CV2 SR SPEC - INDIANAPOLIS N IN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.42

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192189

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

130.38

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

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

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pott, Leslie, , ,

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 (for Individual)
Sandoz Inc.

Occupation (for Individual)
VP Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118826

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pott, Leslie, , ,

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 (for Individual)
Sandoz Inc.

Occupation (for Individual)
VP Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191715

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pyle, Jeremiah, , ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr. Manager Regional Breast Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

399.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118627

Amount of Each Receipt this Period

21.00

☐ Memo Item

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

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

121.00

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

Use separate schedule(s)
for 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pyle, Jeremiah, , ,

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 (for Individual)

Oncology

Occupation (for Individual)

Sr. Manager Regional Breast Marketing

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192203

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Repetti, Cynthia, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

CV2 Sr ABL Long Island NY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118637

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Repetti, Cynthia, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

CV2 Sr ABL Long Island NY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192213

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

51.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Riccobono, Margaret, , ,

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 (for Individual)
Sandoz Inc.

Occupation (for Individual)
Associate Director Talent Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118828

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Riccobono, Margaret, , ,

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 (for Individual)
Sandoz Inc.

Occupation (for Individual)
Associate Director Talent Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191717

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Richert, Jayson, , ,

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 (for Individual)
Sandoz Inc.

Occupation (for Individual)
AD Regional Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.76

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191718

Amount of Each Receipt this Period

57.69

☐ Memo Item

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

80.77

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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☒ 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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Robinson, Melissa, A, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr Oncology Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118644

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Robinson, Melissa, A, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Sr Oncology Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192220

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodgers, Renee, C, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Head Digital Strategy And Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118645

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

60.00

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

Use separate schedule(s)
for 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rodgers, Renee, C, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Head Digital Strategy And Svc

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192221

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rouyer, Marc, G, ,

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 (for Individual)

Alcon

Occupation (for Individual)

Principal Engineer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118367

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rouyer, Marc, G, ,

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 (for Individual)

Alcon

Occupation (for Individual)

Principal Engineer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191833

Amount of Each Receipt this Period

21.00

☐ Memo Item

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

72.00

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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☒ 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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ryan, Alan, D, ,

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 (for Individual)
Sandoz Inc.

Occupation (for Individual)
Dir. US Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118830

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ryan, Alan, D, ,

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 (for Individual)
Sandoz Inc.

Occupation (for Individual)
Dir. US Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191719

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rzewnicki, Peter, , ,

Mailing Address 350 Massachusetts Avenue
350 MA # 234F

City
Cambridge

State
MA

Zip Code
02139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
Executive Director Digital Franchise

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

219.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118831

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

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

51.54

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rzewnicki, Peter, , ,

Mailing Address 350 Massachusetts Avenue
350 MA # 234F

City
Cambridge

State
MA

Zip Code
02139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sandoz Inc.

Occupation (for Individual)

Executive Director Digital Franchise

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191720

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Saad, Ahmad, M, ,

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 (for Individual)

Alcon

Occupation (for Individual)

Principal Engineer Test

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118368

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Saad, Ahmad, M, ,

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 (for Individual)

Alcon

Occupation (for Individual)

Principal Engineer Test

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.80

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191834

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

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

34.62

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Santanastasio Krahling, Helene, M, ,

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 (for Individual)
Corporate

Occupation (for Individual)
AD Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.89

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118791

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Santanastasio Krahling, Helene, M, ,

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 (for Individual)
Corporate

Occupation (for Individual)
AD Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.12

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191680

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schoening, David, A, ,

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 (for Individual)
Alcon

Occupation (for Individual)
Head Global Quality Assurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

292.22

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2119072

Amount of Each Receipt this Period

15.38

☐ Memo Item

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

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

53.84

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schoening, David, A, ,

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 (for Individual)

Alcon

Occupation (for Individual)

Head Global Quality Assurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191620

Amount of Each Receipt this Period

15.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schweitzer, Mark, G, ,

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 (for Individual)
Novartis Technical Operations

Occupation (for Individual)

GLHd AS&T SCI Initiatives Oversight

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118792

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schweitzer, Mark, G, ,

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 (for Individual)
Novartis Technical Operations

Occupation (for Individual)

GLHd AS&T SCI Initiatives Oversight

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191681

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

115.38

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Seeland, Stephen, M, ,

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 (for Individual)
Sandoz Inc.

Occupation (for Individual)
Director Oncology Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118832

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Seeland, Stephen, M, ,

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 (for Individual)
Sandoz Inc.

Occupation (for Individual)
Director Oncology Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191721

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Simpson-Hunt, Stephen, , ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Development QA Senior GCP Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118699

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

38.08

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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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Simpson-Hunt, Stephen, , ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Development QA Senior GCP Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192252

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Smith, Brian, P, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Senior Director Biostatistics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118778

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Smith, Brian, P, ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Senior Director Biostatistics

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192354

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Snapp, Jacob, , ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Technical OperationsOccupation (for Individual)
Sr. Director Commercial Supply Chain

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2018

Transaction ID : A2018-2118706

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Snapp, Jacob, , ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Technical OperationsOccupation (for Individual)
Sr. Director Commercial Supply Chain

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2018

Transaction ID : A2018-2192259

Amount of Each Receipt this Period

57.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sondhi, Manu, , ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Global Drug DevelopmentOccupation (for Individual)
Clinical Development Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2018

Transaction ID : A2018-2118710

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

135.38

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

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

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

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sondhi, Manu, , ,

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 (for Individual)
Global Drug Development

Occupation (for Individual)
Clinical Development Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192263

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Soules, Shane, A, ,

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 (for Individual)
Alcon

Occupation (for Individual)
Regional Field Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2119075

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Soules, Shane, A, ,

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 (for Individual)
Alcon

Occupation (for Individual)
Regional Field Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191623

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

50.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Spelta, William, S, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Reg Dir Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.76

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118712

Amount of Each Receipt this Period

14.04

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Spelta, William, S, ,

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 (for Individual)
Oncology

Occupation (for Individual)
Reg Dir Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192265

Amount of Each Receipt this Period

14.04

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Spurr, Robert, A, ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oncology

Occupation (for Individual)
Oncology US Mkt Access & Health Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2185.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118716

Amount of Each Receipt this Period

115.00

☐ Memo Item

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

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

143.08

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

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

FOR LINE NUMBER:
(check only one)

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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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Spurr, Robert, A, ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Oncology

Occupation (for Individual)

Oncology US Mkt Access &Health Polic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2192269

Amount of Each Receipt this Period

115.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stickley, Lesley, J, ,

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 (for Individual)

Pharma

Occupation (for Individual)

Associate Director Regional Accounts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118725

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stickley, Lesley, J, ,

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 (for Individual)

Pharma

Occupation (for Individual)

Associate Director Regional Accounts

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2192278

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

145.00

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stricker, Edson, J, ,

Mailing Address 6201 South Freeway

City
Fort Worth

State
TX

Zip Code
76134-2001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Alcon

Occupation (for Individual)
Materials Head HOU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.07

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118374

Amount of Each Receipt this Period

11.53

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stricker, Edson, J, ,

Mailing Address 6201 South Freeway

City
Fort Worth

State
TX

Zip Code
76134-2001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Alcon

Occupation (for Individual)
Materials Head HOU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.60

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191840

Amount of Each Receipt this Period

11.53

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Subasinghe, Nishani, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Dir Strategic Alliance Dev.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1562.25

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118799

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

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

119.21

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Subasinghe, Nishani, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Dir Strategic Alliance Dev.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1658.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191688

Amount of Each Receipt this Period

96.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sullivan, Jessica, L, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Sr Account Manager-Academic Develop

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118733

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sullivan, Jessica, L, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Sr Account Manager-Academic Develop

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192286

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

126.15

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

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

FOR LINE NUMBER: PAGE 111 OF 138
(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Suter, Thomas, A, ,

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 (for Individual)

Corporate

Occupation (for Individual)

Director State Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1480.95

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118801

Amount of Each Receipt this Period

96.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Suter, Thomas, A, ,

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 (for Individual)

Corporate

Occupation (for Individual)

Director State Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1577.10

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2191690

Amount of Each Receipt this Period

96.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Troisi, Brian, L, ,

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 (for Individual)

NBS

Occupation (for Individual)

Service Operations Expert Prevention

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

399.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118803

Amount of Each Receipt this Period

21.00

☐ Memo Item

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

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

213.30

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

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

FOR LINE NUMBER: PAGE 112 OF 138
(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Troisi, Brian, L, ,

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 (for Individual)

NBS

Occupation (for Individual)

Service Operations Expert Prevention

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191692

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Urban, Thomas, A, ,

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 (for Individual)
Pharma

Occupation (for Individual)

Respiratory Executive Sales Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.81

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118762

Amount of Each Receipt this Period

21.40

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Urban, Thomas, A, ,

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 (for Individual)
Pharma

Occupation (for Individual)

Respiratory Executive Sales Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

424.21

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2192315

Amount of Each Receipt this Period

21.40

☐ Memo Item

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

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

63.80

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

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

FOR LINE NUMBER:
(check only one)

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Utt, Lisa, R, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Area Leader Patient Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.15

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118764

Amount of Each Receipt this Period

13.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Utt, Lisa, R, ,

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 (for Individual)
Pharma

Occupation (for Individual)
Area Leader Patient Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2192317

Amount of Each Receipt this Period

13.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Van Meter, Jennifer, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
Director Quality Ext Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

570.00

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118805

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

57.70

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

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

FOR LINE NUMBER: PAGE 114 OF 138

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Van Meter, Jennifer, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
Director Quality Ext Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191694

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vanhaecke, Erwin, , ,

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 (for Individual)
Alcon

Occupation (for Individual)
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.12

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2119077

Amount of Each Receipt this Period

23.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vanhaecke, Erwin, , ,

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 (for Individual)
Alcon

Occupation (for Individual)
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

346.20

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191625

Amount of Each Receipt this Period

23.08

☐ Memo Item

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

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

76.16

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 115 OF 138
(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vineis, Mark, , ,

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 (for Individual)

Pharma

Occupation (for Individual)

VP Access Strategy & Commercializati

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1463.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118769

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vineis, Mark, , ,

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 (for Individual)
Pharma

Occupation (for Individual)

VP Access Strategy & Commercializati

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2192322

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Voegtli, William, W, ,

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 (for Individual)
Oncology

Occupation (for Individual)

Senior Reimbursement Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

266.76

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118770

Amount of Each Receipt this Period

14.04

☐ Memo Item

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

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

168.04

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

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

FOR LINE NUMBER:
(check only one)

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Voegtli, William, W, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Senior Reimbursement Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.80

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2192323

Amount of Each Receipt this Period

14.04

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Walton, Vikki, D, ,

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 (for Individual)

Corporate

Occupation (for Individual)

Dir State Public Policy & Ext Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

MM / DD / YYYY
09 / 14 / 2018

Transaction ID : A2018-2118807

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Walton, Vikki, D, ,

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 (for Individual)

Corporate

Occupation (for Individual)

Dir State Public Policy & Ext Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

MM / DD / YYYY
09 / 28 / 2018

Transaction ID : A2018-2191696

Amount of Each Receipt this Period

21.00

☐ Memo Item

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

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

56.04

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

Use separate schedule(s)
for 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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wilkinson, Erik, A, ,

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 (for Individual)
Pharma

Occupation (for Individual)
NS Exec Sales Specialist - Tucson

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118667

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wilkinson, Erik, A, ,

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 (for Individual)
Pharma

Occupation (for Individual)
NS Exec Sales Specialist - Tucson

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2192334

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Williams, Donna Lee, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
Director Federal Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118808

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

85.00

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

Use separate schedule(s)
for 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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Williams, Donna Lee, , ,

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 (for Individual)
Corporate

Occupation (for Individual)
Director Federal Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191697

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wojtylak, Melissa, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
Director Legal Ops. & Ass. Gen. Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2018

Transaction ID : A2018-2118836

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wojtylak, Melissa, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
Director Legal Ops. & Ass. Gen. Counse

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : A2018-2191725

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

160.00

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wyble, Christine, D, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Gbl Head Scientific Engagement & Cor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118675

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wyble, Christine, D, ,

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 (for Individual)

Oncology

Occupation (for Individual)

Gbl Head Scientific Engagement & Cor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

09 / 28 / 2018

Transaction ID : A2018-2192342

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Zuluaga, Juan, C, ,

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 (for Individual)

Pharma

Occupation (for Individual)

Cardiovascular ABL Central NJ

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

399.00

Date of Receipt

09 / 14 / 2018

Transaction ID : A2018-2118680

Amount of Each Receipt this Period

21.00

☐ Memo Item

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

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

44.08

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

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

FOR LINE NUMBER: PAGE 120 OF 138
 (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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Zuluaga, Juan, C, ,

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 (for Individual)

Pharma

Occupation (for Individual)

Cardiovascular ABL Central NJ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 28 / 2018

Transaction ID : A2018-2192347

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

21.00

12415.37

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

PAGE 121 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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. Anna Eshoo for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		20		2018

Mailing Address P.O. Box 636

City
AnnandaleState
VAZip Code
22003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Eshoo, Anna, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 18

FEC Identification Number

C C00258475

Transaction ID : B703239

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Dr. Raul Ruiz for Congress Cmte

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		20		2018

Mailing Address P.O. Box 15096

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Ruiz, Raul, , , MD

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 36

FEC Identification Number

C C00502575

Transaction ID : B703244

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Engel for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		20		2018

Mailing Address 38 Ivy Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Engel, Eliot, L, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 16

FEC Identification Number

C C00236513

Transaction ID : B703240

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:
(check only one)

PAGE 122 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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. Friends of John Thune

Mailing Address PO Box 841

City
Sioux FallsState
SDZip Code
57101Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Thune, John, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: SD

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	0			2	0	1	8		

FEC Identification Number

C C00409581**Transaction ID : B703236**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Josh Gottheimer for Congress

Mailing Address 219 Pennsylvania Ave. SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Gottheimer, Josh, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	0			2	0	1	8		

FEC Identification Number

C C00573949**Transaction ID : B703243**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Keystone America PAC

Mailing Address 750 1st Street NE Suite 1070

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Not Applicable

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	0			2	0	1	8		

FEC Identification Number

C C00439992**Transaction ID : B703636**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2500.00

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

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

PAGE 123 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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. Montanans for Tester

Mailing Address 1140 3rd Street NE Floor 2

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Tester, Jon, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: MT

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	0			2	0	1	8		

FEC Identification Number

C C00412304**Transaction ID : B703237**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Neal for Congress

Mailing Address 415 New Jersey Ave. SE Suite 1

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Neal, Richard, E, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: MA

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	0			2	0	1	8		

FEC Identification Number

C C00226522**Transaction ID : B703245**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Next Century Fund

Mailing Address 116 South Royal Street

City
AlexandriaState
VIZip Code
22314Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Not Applicable

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	0			2	0	1	8		

FEC Identification Number

C C00343947**Transaction ID : B703247**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:
(check only one)

PAGE 124 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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. People for Derek Kilmer

Mailing Address 412 First Street SE Suite 100

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Kilmer, Derek, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: WA

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	0			2	0	1	8		

FEC Identification Number

C C00514893

Transaction ID : B703246

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Robin Kelly for Congress

Mailing Address 413 New Jersey Ave. SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Kelly, Robin, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	0			2	0	1	8		

FEC Identification Number

C C00539866

Transaction ID : B703248

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Scalise for Congress

Mailing Address 317 15th Street NE

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Scalise, Steve, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: LA

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	0			2	0	1	8		

FEC Identification Number

C C00394957

Transaction ID : B703238

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

6000.00

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

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

PAGE 125 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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. Bucshon for Congress

Mailing Address PO Box 40323

City
WashingtonState
DCZip Code
20016Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Bucshon, Larry, D, ,

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2018

☐

Primary

☒

General

☐

Other (specify) ▼

State: IN

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	1	8		

FEC Identification Number

C C00468256**Transaction ID : B704280**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kurt Schrader for Congress

Mailing Address 412 First Street SE Suite 100

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Schrader, Kurt, , ,

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2018

☐

Primary

☒

General

☐

Other (specify)

State: OR

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	1	8		

FEC Identification Number

C C00446906**Transaction ID : B704321**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2500.00

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

19500.00

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

PAGE 126 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. Phil Berger Campaign

Mailing Address P.O. Box 1309

City
EdenState
NCZip Code
27289Purpose of Disbursement
G-2018 State Senate 30 NC

011

Category/
Type

Candidate Name

Berger, Phillip, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2018

☐ Primary☒ General☐ Other (specify) ▼

State: NC

District: 30

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703254

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Chaudhuri for New North Carolina

Mailing Address 434 Fayetteville St. Suite 2020

City
RaleighState
NCZip Code
27601Purpose of Disbursement
G-2018 State Senate 16 NC

011

Category/
Type

Candidate Name

Chaudhuri, Jay, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2018

☐ Primary☒ General☐ Other (specify) ▼

State: NC

District: 16

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703635

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Josh Dobson for NC House Cmte

Mailing Address 649 South Creek Road

City
NeboState
NCZip Code
28761Purpose of Disbursement
G-2018 State House 85 NC

011

Category/
Type

Candidate Name

Dobson, Josh, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2018

☐ Primary☒ General☐ Other (specify) ▼

State: NC

District: 85

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703259

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:
(check only one)

PAGE 127 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. Dollar for House

Mailing Address P.O. Box 1352

City
CaryState
NCZip Code
27512Purpose of Disbursement
G-2018 State House 36 NC

011

Category/
Type

Candidate Name

Dollar, Nelson, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: NC

District: 36

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2018

FEC Identification Number

C

Transaction ID : B703257

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jean Farmer-Butterfield Campaign

Mailing Address 434 Fayetteville St. Suite 2020

City
RaleighState
NCZip Code
27601Purpose of Disbursement
G-2018 State House 24 NC

011

Category/
Type

Candidate Name

Farmer-Butterfield, Jean, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: NC

District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2018

FEC Identification Number

C

Transaction ID : B703262

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Rick Horner for NC Senate

Mailing Address P.O. Box 8144

City
WilsonState
NCZip Code
27896Purpose of Disbursement
G-2018 State Senate 11 NC

011

Category/
Type

Candidate Name

Horner, Rick, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: NC

District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2018

FEC Identification Number

C

Transaction ID : B703252

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:
(check only one)

PAGE 128 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. Darren Jackson for NC House

Mailing Address 5530 Munford Road Suite 105

City
RaleighState
NCZip Code
27612Purpose of Disbursement
G-2018 State House 39 NC

011

Category/
Type

Candidate Name

Jackson, Darren, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: NC

District: 39

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703263

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Joyce Krawiec for State Senate

Mailing Address 7030 Interlaken Drive

City
KernersvilleState
NCZip Code
27284Purpose of Disbursement
G-2018 State Senate 31 NC

011

Category/
Type

Candidate Name

Krawiec, Joyce, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: NC

District: 31

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703250

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Committee to Elect Donny Lambeth

Mailing Address 4627 S. Main Street

City
Winston SalemState
NCZip Code
27127Purpose of Disbursement
G-2018 State House 75 NC

011

Category/
Type

Candidate Name

Lambeth, Donny, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: NC

District: 75

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703261

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

**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 type="checkbox"/> 23	<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. The Cmte to Elect Mike Woodard

Mailing Address 732 9th Street

City
DurhamState
NCZip Code
27705Purpose of Disbursement
G-2018 State Senate 22 NC

011

Category/
Type

Candidate Name

Woodard, Mike, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: NC

District: 22

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703256

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Nickie J. Antonio

Mailing Address 1305 Belle Avenue

City
LakewoodState
OHZip Code
44107Purpose of Disbursement
G-2018 State Senate 23 OH

011

Category/
Type

Candidate Name

Antonio, Nickie, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 23

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703626

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Citizens for Blessing

Mailing Address 3378 Dolomar Drive

City
CincinnatiState
OHZip Code
45239Purpose of Disbursement
G-2018 State House 29 OH

011

Category/
Type

Candidate Name

Blessing, Louis, , , Jr.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 29

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703628

Amount of Each Disbursement this Period

500.00

☐ Memo Item**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 PageFOR LINE NUMBER:
(check only one)

PAGE 131 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. Friends of Jonathan Dever

Mailing Address 255 E. 5th St. Suite 1900

City
CincinnatiState
OHZip Code
45202Purpose of Disbursement
G-2018 State House 28 OH

011

Category/
Type

Candidate Name

Dever, Jonathan, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 28

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2018

FEC Identification Number

C

Transaction ID : B703620

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Jay Edwards

Mailing Address 35950 Union Ridge Road

City
AlbanyState
OHZip Code
45710Purpose of Disbursement
G-2018 State House 94 OH

011

Category/
Type

Candidate Name

Edwards, Jay, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 94

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2018

FEC Identification Number

C

Transaction ID : B703624

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Citizens for Gavarone

Mailing Address 1537 Cedar Lane

City
Bowling GreenState
OHZip Code
43402Purpose of Disbursement
G-2018 State House 03 OH

011

Category/
Type

Candidate Name

Gavarone, Theresa, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2018

FEC Identification Number

C

Transaction ID : B703619

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

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

PAGE 132 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. Steve Huffman for State Rep.

Mailing Address PO Box 739

City
TROYState
OHZip Code
45373Purpose of Disbursement
G-2018 State House 80 OH

011

Category/
Type

Candidate Name

Huffman, Stephen, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 80

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	21	/	2018

FEC Identification Number

C

Transaction ID : B703623

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Derek Merrin

Mailing Address P.O. Box 75

City
MonclovaState
OHZip Code
43524Purpose of Disbursement
G-2018 State House 47 OH

011

Category/
Type

Candidate Name

Merrin, Derek, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 47

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	21	/	2018

FEC Identification Number

C

Transaction ID : B703631

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Citizens for Obhof

Mailing Address 88 E. Broad St. Suite 1650

City
ColumbusState
OHZip Code
43215Purpose of Disbursement
P-2020 State Senate 22 OH

011

Category/
Type

Candidate Name

Obhof, Larry, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State: OH

District: 22

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	21	/	2018

FEC Identification Number

C

Transaction ID : B703632

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

**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 type="checkbox"/> 23	<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. Oelslager for Ohio Committee

Mailing Address 6706 Lake Cable Ave. NW

City
North CantonState
OHZip Code
44720Purpose of Disbursement
G-2018 State Senate 29 OH

011

Category/
Type

Candidate Name

Oelslager, Scott, W, ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2018

☐ Primary☒ General☐ Other (specify) ▼

State: OH

District: 29

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2018

FEC Identification Number

C

Transaction ID : B703629

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Seitz for State Representative

Mailing Address 4401 Abby Court

City
CincinnatiState
OHZip Code
45248Purpose of Disbursement
G-2018 State House 30 OH

011

Category/
Type

Candidate Name

Seitz, Bill, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2018

☐ Primary☒ General☐ Other (specify) ▼

State: OH

District: 30

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2018

FEC Identification Number

C

Transaction ID : B703621

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Emilia Sykes Campaign

Mailing Address 109 North Howard St. Unit A

City
AkronState
OHZip Code
44308Purpose of Disbursement
G-2018 State House 34 OH

011

Category/
Type

Candidate Name

Sykes, Emilia, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2018

☐ Primary☒ General☐ Other (specify) ▼

State: OH

District: 34

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2018

FEC Identification Number

C

Transaction ID : B703630

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

**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 type="checkbox"/> 23	<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. Friends of Lou Terhar

Mailing Address 5595 Boomer Rd.

City
CincinnatiState
OHZip Code
45247Purpose of Disbursement
P-2020 State Senate 8 OH

011

Category/
Type

Candidate Name

Terhar, Lou, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State: OH

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703633

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Brinkman Campaign Committee

Mailing Address 3215 Hardisty Ave.

City
CincinnatiState
OHZip Code
45208Purpose of Disbursement
G-2018 State House 27 OH

011

Category/
Type

Candidate Name

Tom, Brinkman, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 27

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703634

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PA Senate Republican Campaign Cmte

Mailing Address P.O. Box 792

City
HarrisburgState
PAZip Code
17108Purpose of Disbursement
State Party Cmte

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Not Applicable

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703618

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2000.00

**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 type="checkbox"/> 23	<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. Baker for Senate Cmte

Mailing Address P.O. Box 59

City
LehmanState
PAZip Code
18627Purpose of Disbursement
G-2018 State Senate 20 PA

011

Candidate Name

Baker, Lisa, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 20

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703607

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. People to Elect Brooks

Mailing Address P.O. Box 792

City
HarrisburgState
PAZip Code
17108Purpose of Disbursement
G-2018 State Senate 50 PA

011

Candidate Name

Brooks, Michele, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 50

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703611

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Citizens for Patrick Browne

Mailing Address P.O. Box 792

City
HarrisburgState
PAZip Code
17108Purpose of Disbursement
G-2018 State Senate 16 PA

011

Candidate Name

Browne, Patrick, M, ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 16

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703616

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

**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 type="checkbox"/> 23	<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. Friends of Jake Corman

Mailing Address P.O. Box 421

City
BellefonteState
PAZip Code
16823Purpose of Disbursement
G-2018 State Senate 34 PA

011

Category/
Type

Candidate Name

Corman, Jacob, D, ,

Office Sought:

☐

House

☒

Senate

☐

President

Disbursement For: 2018

☐

Primary

☒

General

☐

Other (specify) ▼

State: PA

District: 34

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703613

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Bryan Cutler

Mailing Address P.O. Box 7365

City
SteeltonState
PAZip Code
17113Purpose of Disbursement
G-2018 State House 100 PA

011

Category/
Type

Candidate Name

Cutler, Bryan, , ,

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2018

☐

Primary

☒

General

☐

Other (specify) ▼

State: PA

District: 10

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703606

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Longietti

Mailing Address 3660 Clearview Drive

City
HermitageState
PAZip Code
16148Purpose of Disbursement
G-2018 State House 7th PA

011

Category/
Type

Candidate Name

Longietti, Mark, , ,

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2018

☐

Primary

☒

General

☐

Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : B703614

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

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

PAGE 137 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. Kathy Rapp for Representative

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		21		2018

Mailing Address 3780 Follett Run Road

City
WarrenState
PAZip Code
16365Purpose of Disbursement
G-2018 State House 65 PA

011

Category/
Type

Candidate Name

Rapp, Kathy, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA

District: 65

FEC Identification Number

C

Transaction ID : B703610

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens for Saylor

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		21		2018

Mailing Address 2601 North Front St. Suite 101

City
HarrisburgState
PAZip Code
17110Purpose of Disbursement
G-2018 State House 94 PA

011

Category/
Type

Candidate Name

Saylor, Stanley, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA

District: 94

FEC Identification Number

C

Transaction ID : B703615

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Joe Scarnati

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		21		2018

Mailing Address PO Box 177

City
BrockwayState
PAZip Code
15824Purpose of Disbursement
P-2020 State Senate 25 PA

011

Category/
Type

Candidate Name

Scarnati, Joe, , , III

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA

District: 25

FEC Identification Number

C

Transaction ID : B703617

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 138 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. Friends of Mike Turzai

Mailing Address P.O. Box 92

City
HarrisburgState
PAZip Code
17108Purpose of Disbursement
G-2018 State House 28 PA

011

Category/
Type

Candidate Name

Turzai, Mike, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA

District: 28

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2018

FEC Identification Number

C

Transaction ID : B703612

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

500.00

25500.00