

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 701 Pennsylvania Ave. NW Suite 725  
 Check if different than previously reported. (ACC)  
Washington DC 20004-2608

2. **FEC IDENTIFICATION NUMBER** C00033969  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 08 01 2007 through 08 31 2007

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

Type or Print Name of Treasurer Dan P. Casserly

Signature of Treasurer Electronically Filed by Dan P. Casserly Date 09 18 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Novartis Corporation Political Action Committee

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		92392.10
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	118666.32									
(c) Total Receipts (from Line 19) .....	44285.09	247789.62								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	162951.41	340181.72								
7. Total Disbursements (from Line 31) .....	40595.00	217825.31								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	122356.41	122356.41								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Novartis Corporation Political Action Committee

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	12735.62	75316.90
(i) Itemized (use Schedule A) .....	18450.47	159373.72
(ii) Unitemized .....	31186.09	234690.62
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	31186.09	234690.62
12. Transfers From Affiliated/Other Party Committees .....	13099.00	13099.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	44285.09	247789.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	44285.09	247789.62

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	795.00	814.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	795.00	814.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	39000.00	199500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	610.56
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	610.56
29. Other Disbursements.....	800.00	16900.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	40595.00	217825.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	40595.00	217825.31

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	31186.09	234690.62
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	610.56
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	31186.09	234080.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	795.00	814.75
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	795.00	814.75

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 65
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Joseph J Affuso		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462308	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 133.46		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1061.18		

Full Name (Last, First, Middle Initial) <b>B.</b> Gary J Appio		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461938	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Frank J Arena		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462055	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	213.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Andrew K Arline		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462591
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Michael Banko		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462054
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Elisa Bauer		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461267
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Michael Beck</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462289</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B. Timothy C Bedman</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1461994</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 42.68	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 337.76	

Full Name (Last, First, Middle Initial) <b>C. Brenda Blanchard</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1461375</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 416.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Services Incorporated Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3328.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	533.68
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Rainer Boehm</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462022</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

Full Name (Last, First, Middle Initial) <b>B. Peri K Bonner</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1461671</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 47.88		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.04		

Full Name (Last, First, Middle Initial) <b>C. Troy L Borill</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462343</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 32.87		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.22		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	230.75
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Leonard J Brandt		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462033	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B.</b> George G Bretz		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462370	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ellen M Browne		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462124	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Robert S Bullock II

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 20 / 2007

**Transaction ID:** A2007-1461492

Amount of Each Receipt this Period  
50.00

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Services Incorporated Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 20 / 2007

**Transaction ID:** A2007-1461853

Amount of Each Receipt this Period  
100.00

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 20 / 2007

**Transaction ID:** A2007-1461250

Amount of Each Receipt this Period  
30.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Catherine T Burton		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462268	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 120.39		
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 957.24		

Full Name (Last, First, Middle Initial) <b>B.</b> Ronald M Califre		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462028	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 416.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3328.00		

Full Name (Last, First, Middle Initial) <b>C.</b> James P Carey		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462278	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 72.90		
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 577.58		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	609.29
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
James L Carrico

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 20 / 2007

Transaction ID: A2007-1461558

Amount of Each Receipt this Period  
30.00

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Services Incorporated Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 20 / 2007

Transaction ID: A2007-1461718

Amount of Each Receipt this Period  
200.00

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
664.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 20 / 2007

Transaction ID: A2007-1462310

Amount of Each Receipt this Period  
84.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	314.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Atindra N Chaturvedi

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 20 / 2007

Transaction ID: A2007-1461947

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Barbara Christensen-Boner

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
384.70

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 20 / 2007

Transaction ID: A2007-1461308

Amount of Each Receipt this Period  
48.61

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 20 / 2007

Transaction ID: A2007-1463027

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	148.61
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Paulo F Costa</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1461143</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 416.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Services Incorporated Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3328.00	

Full Name (Last, First, Middle Initial) <b>B. Eric Dammeyer</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1461603</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 370.00	

Full Name (Last, First, Middle Initial) <b>C. Donald W DeGolyer</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462057</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	506.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Ronald E Dei Cas		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		Transaction ID: A2007-1462265	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Robert J Derbes		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		Transaction ID: A2007-1461491	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Kimberly A Derchak		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		Transaction ID: A2007-1461699	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	115.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Candace B Dibblee		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		Transaction ID: A2007-1462146	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Services Incorporated		Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1262.66	

Full Name (Last, First, Middle Initial) <b>B.</b> David P Drake		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		Transaction ID: A2007-1461944	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 164.01	
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Services Incorporated		Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1283.88	

Full Name (Last, First, Middle Initial) <b>C.</b> David M Eberenz Jr.		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		Transaction ID: A2007-1461801	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals		Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	394.01
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> James A Edwards		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462304
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B.</b> James R Elkin		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461380
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 416.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Services Incorporated	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3328.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Jeffrey J Elton		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462672
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NIBRI	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	516.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Steven A Engelhardt</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462000</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 188.02	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1486.02	

Full Name (Last, First, Middle Initial) <b>B. Rita D Engler</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1461910</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 26.88	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 226.82	

Full Name (Last, First, Middle Initial) <b>C. David R Epstein</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462002</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	314.90
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 65		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

Full Name (Last, First, Middle Initial) <b>A. Christopher Esposito</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462315</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) <b>B. Eric W Evans</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462674</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Robert E Fee</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462127</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 54.83	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 513.59	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	229.83
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Paul Frederick		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461831	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 46.72	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 370.16	

Full Name (Last, First, Middle Initial) <b>B.</b> Debra E Freire		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462049	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Neely T Frye		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461888	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 108.88	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 858.56	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	205.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Albert Galloza		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461240
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Novartis Pharma Suffern	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Valerie L Gerbino		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462192
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Thomas E Giles		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462056
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 175.00
Name of Employer Novartis Services Incorporated	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	255.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Robert Gines</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1461688</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Services Incorporated Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>B. Alex Gorsky</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462693</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1600.00	

Full Name (Last, First, Middle Initial) <b>C. Ronald E Graham</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1461539</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 42.93	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 339.80	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	342.93
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 65
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mark D Grebenau		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462311	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 151.46	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1129.63	

Full Name (Last, First, Middle Initial) <b>B.</b> Kurt Habel		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461939	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Sarah E Haller		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461848	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 78.55	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Services Incorporated Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 621.30	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	280.01
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Jeffrey W Hardy</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462707</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) <b>B. Daryl Harvey</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1461475</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

Full Name (Last, First, Middle Initial) <b>C. Jerilyn Hayes</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462010</b>	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Joseph P Hazelton		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461923
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.58
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.84	

Full Name (Last, First, Middle Initial) <b>B.</b> Cynthia Hogan		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461174
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C.</b> William C Hokanson		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461743
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	109.58
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Woodson M Hopkins		Date of Receipt MM / DD / YYYY 08 / 20 / 2007
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462393
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Gene M Hughes		Date of Receipt MM / DD / YYYY 08 / 20 / 2007
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462302
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mathias Hukkelhoven		Date of Receipt MM / DD / YYYY 08 / 20 / 2007
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461989
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) David S Jones		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461141	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Sheldon Jones		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461357	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 73.93	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Finance Corporation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.76	

<b>C.</b> Full Name (Last, First, Middle Initial) Michael E Kehoe		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1208765	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 92.30	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Corporation staff			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1199.90	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	216.23
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Michael E Kehoe		Date of Receipt MM / DD / YYYY 08 / 17 / 2007
Mailing Address One Health Plaza		Transaction ID: A2007-1312844
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 92.30
Name of Employer Novartis Corporation	Occupation staff	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1292.20	

Full Name (Last, First, Middle Initial) B. Michael E Kehoe		Date of Receipt MM / DD / YYYY 08 / 31 / 2007
Mailing Address One Health Plaza		Transaction ID: A2007-1471112
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 92.30
Name of Employer Novartis Corporation	Occupation staff	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1384.50	

Full Name (Last, First, Middle Initial) C. Barbara K Kennedy		Date of Receipt MM / DD / YYYY 08 / 20 / 2007
Mailing Address One Health Plaza		Transaction ID: A2007-1462024
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	209.60
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 65		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

**A.** Full Name (Last, First, Middle Initial)  
Karen L Key

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
08 / 20 / 2007

Transaction ID: A2007-1463005

Amount of Each Receipt this Period  
50.00

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
291.64

Date of Receipt  
08 / 20 / 2007

Transaction ID: A2007-1461690

Amount of Each Receipt this Period  
36.98

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1600.00

Date of Receipt  
08 / 20 / 2007

Transaction ID: A2007-1461615

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	286.98
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Crystal L Kuntz		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462450	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Keith A LaDue		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461928	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Sharon Larrison		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462245	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Robert F Lavery		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462029	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Finance Corporation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Richard E Lemire		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461155	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 77.40	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharma Suffern Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 613.96	

Full Name (Last, First, Middle Initial) <b>C.</b> Gary D Lindenbaum		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461950	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	207.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Jeffrey W Lockwood		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462134
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer NIBRI Occupation Executive	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Lon D Lowrey		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461345
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals Occupation Executive	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Francis D Mangieri		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462282
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals Occupation Executive	Aggregate Year-to-Date ▼ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	205.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mary L Manning		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462368	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 83.33		
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 666.64		

Full Name (Last, First, Middle Initial) <b>B.</b> Kenneth L Massey		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461758	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> William R Matthews		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461872	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 38.63		
FEC ID number of contributing federal political committee. C			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.88		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	171.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. G. M Mc Garry</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462121</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>B. William D Mc Laury</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1461720</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>C. Matthew C Mc Namara</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1461757</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	170.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 65
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Catharine M McGeehan</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1461656</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B. Brian McNamara</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 5 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1550828</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Sr. Vice President OTC			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) <b>C. Brian McNamara</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 1 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1550829</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Sr. Vice President OTC			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	175.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Wayne P Merkelson</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462061</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Finance Corporation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Kathryn C Metcalfe</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462369</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1600.00	

Full Name (Last, First, Middle Initial) <b>C. George L Miller</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462952</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 233.25	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Finance Corporation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1849.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	508.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Anthony J Mixon		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461767
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Stacey L Moore		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461620
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 28.60	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.66	

Full Name (Last, First, Middle Initial) <b>C.</b> Regina C Moran		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462293
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 61.43	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 487.88	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	132.03
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1112.90

Date of Receipt  
08 / 20 / 2007

Transaction ID: A2007-1461916

Amount of Each Receipt this Period  
141.46

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
08 / 20 / 2007

Transaction ID: A2007-1462040

Amount of Each Receipt this Period  
100.00

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1233.36

Date of Receipt  
08 / 20 / 2007

Transaction ID: A2007-1462047

Amount of Each Receipt this Period  
154.17

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>395.63</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Services Incorporated Executive

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 20 / 2007

Transaction ID: A2007-1461798

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Dennis J O'Leary Jr.

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.86

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 20 / 2007

Transaction ID: A2007-1461894

Amount of Each Receipt this Period  
44.18

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 20 / 2007

Transaction ID: A2007-1461405

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	174.18
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Serafina Oxner</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462092</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Melissa A Parker</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462171</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>C. Raymond Pawlicki</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462016</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Angela K Peck		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461324	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Paul G Pochtar		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461959	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 200.26	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1588.52	

Full Name (Last, First, Middle Initial) <b>C.</b> Diana Potter		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461954	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	280.26
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 65		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

Full Name (Last, First, Middle Initial) <b>A.</b> Marilyn Priestley		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461958	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Brian C Prout		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1463024	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Jose A Ramirez		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461427	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Rebecca W Reid</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462170</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 43.42	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 343.22	

Full Name (Last, First, Middle Initial) <b>B. David P Riedel</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1461834</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 65.32	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 516.34	

Full Name (Last, First, Middle Initial) <b>C. Kevin T Rigby</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID: A2007-1462013</b>	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	308.74
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Brandi K Robinson		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461280	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Finance Corporation		Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Patrick Ronan		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1463048	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals		Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Gary E Rosenthal		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462117	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 416.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals		Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3328.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	696.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 65
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Jason T Russell

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
405.83

Date of Receipt  
08 / 20 / 2007

Transaction ID: A2007-1461291

Amount of Each Receipt this Period  
51.42

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
08 / 20 / 2007

Transaction ID: A2007-1461194

Amount of Each Receipt this Period  
75.00

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1730.66

Date of Receipt  
08 / 20 / 2007

Transaction ID: A2007-1461279

Amount of Each Receipt this Period  
218.94

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>345.36</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Ronald B Sira		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462111
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Jay S Smith		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461379
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Eric M Snedecor		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461142
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	190.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Katherine E Solon		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462997	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 155.25	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Services Incorporated Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1231.50	

<b>B.</b> Full Name (Last, First, Middle Initial) Lisa A Steelman		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461179	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 115.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 920.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Donald P Stevens		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461420	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	345.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 65
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Gloria C Stone		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462015	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 64.50	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 511.64	

Full Name (Last, First, Middle Initial) <b>B.</b> John Suchorsky		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462009	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Dennis Sullivan		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 7	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461678	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	144.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Joseph E Talbott		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461737
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 81.51	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 646.56	

Full Name (Last, First, Middle Initial) <b>B.</b> Kamran Tavangar		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461276
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Barbara A Tombros		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461943
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 67.84	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Novartis Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1409.82	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	179.35
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Christina M Tremains		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		Transaction ID: A2007-1462226	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 56.78		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 449.14		

Full Name (Last, First, Middle Initial) <b>B.</b> Thomas A Urban		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		Transaction ID: A2007-1461180	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 28.31		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 223.88		

Full Name (Last, First, Middle Initial) <b>C.</b> Lisa R Utt		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		Transaction ID: A2007-1461369	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	115.09
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> James W Ventura		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462402	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Andrew J Volante		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461838	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Pharmaceuticals	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ross D Volk		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461868	
City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Novartis Services Incorporated	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	380.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 65
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Cynthia K Walker		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461858	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Barbara E Washington		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1461862	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 182.35	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1445.70	

Full Name (Last, First, Middle Initial) <b>C.</b> Stephan M Webb		Date of Receipt M M / D D / Y Y Y Y Y 08 / 20 / 2007	
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2007-1462329	
City State Zip Code East Hanover NJ 07936		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Novartis Pharmaceuticals Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	262.35
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 54 / 65
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Michael D Webster

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
305.52

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 20 / 2007

Transaction ID: A2007-1462182

Amount of Each Receipt this Period  
38.65

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
390.88

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 20 / 2007

Transaction ID: A2007-1461481

Amount of Each Receipt this Period  
49.16

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 20 / 2007

Transaction ID: A2007-1462085

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	137.81
<b>TOTAL</b> This Period (last page this line number only) .....	▶	12735.62

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 55 / 65	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Chiron Employee PAC

Mailing Address 1300 Eye St. NW Suite 1090 E

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
13099.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	7

Transaction ID: A6223

Amount of Each Receipt this Period  
13099.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	13099.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	13099.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Novartis Corporation</b>		Transaction ID: B181639 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7	
Mailing Address 701 Pennsylvania Ave. NW Suite 72		Amount of Each Disbursement this Period 795.00	
City Washington State DC Zip Code 20004	Purpose of Disbursement Reimb. corp. for State admin exp.	Category/ Type 001	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	795.00
<b>TOTAL</b> This Period (last page this line number only) .....	795.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 57 / 65

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

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

Full Name (Last, First, Middle Initial) <b>A. Wilson for Congress</b>		<b>Transaction ID: B181635</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address P.O. Box 29576		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20017	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. House 02 SC		
Candidate Name Joe (Addison Graves) Wilson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Rangel for Congress</b>		<b>Transaction ID: B181637</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address P.O. Box 5577 Manhattanville Station		Amount of Each Disbursement this Period 2500.00
City New York State NY Zip Code 10027	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. House 15 NY		
Candidate Name Charles B Rangel		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends of John Tanner</b>		<b>Transaction ID: B181623</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address 236 Massachusetts Ave. NE Suite 5		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. House 08 TN		
Candidate Name John S Tanner		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A. Hoosiers Supporting Steve Buyer</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 712 City Monticello State IN Zip Code 47960 Purpose of Disbursement P-2008 U.S. House 04 IN Candidate Name Steve Buyer Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 04 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B181624</b> Date of Disbursement 08 / 03 / 2007 Amount of Each Disbursement this Period 1000.00 011 Category/ Type
---	--	--

<b>B. Enzi for Senate</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 2775 City Cody State WY Zip Code 82414 Purpose of Disbursement G-2008 U.S. Senate WY Candidate Name Michael B Enzi Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WY District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B181625</b> Date of Disbursement 08 / 03 / 2007 Amount of Each Disbursement this Period 1500.00 011 Category/ Type
--	--	--

<b>C. Hoyer for Congress</b> Full Name (Last, First, Middle Initial) Mailing Address 7905 Malcolm Rd. Suite 102 City Clinton State MD Zip Code 20735 Purpose of Disbursement P-2008 U.S. House 05 MD Candidate Name Steny H Hoyer Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B181626</b> Date of Disbursement 08 / 03 / 2007 Amount of Each Disbursement this Period 2500.00 011 Category/ Type
---	--	--

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends of Bennie Thompson</b>		<b>Transaction ID: B181627</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address 236 Massachusetts Ave. NE Suite 5		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20002	Purpose of Disbursement P-2008 U.S. House 02 MS Candidate Name Bennie G Thompson Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Enzi for Senate</b>		<b>Transaction ID: B181628</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address P.O. Box 2775		Amount of Each Disbursement this Period 2500.00
City Cody State WY Zip Code 82414	Purpose of Disbursement P-2008 U.S. Senate WY Candidate Name Michael B Enzi Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WY District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Boucher for Congress</b>		<b>Transaction ID: B181629</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address P.O. Box 2000		Amount of Each Disbursement this Period 1000.00
City Abingdon State VA Zip Code 24212	Purpose of Disbursement P-2008 U.S. House 09 VA Candidate Name Rick Boucher Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 09	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Price for Congress</b>		<b>Transaction ID:</b> B181630 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address P.O. Box 1986		Amount of Each Disbursement this Period 1500.00
City Raleigh State NC Zip Code 27602	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. House 04 NC		
Candidate Name David E Price		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Stevens for Senate</b>		<b>Transaction ID:</b> B181631 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address P.O. Box 1766		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20013	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. Senate AK		
Candidate Name Ted Stevens		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Citizens for Arlen Specter</b>		<b>Transaction ID:</b> B181632 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address 203 Maryland Ave. NE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement P-2010 U.S. Senate PA		
Candidate Name Arlen Specter		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Freedom Fund</b>		<b>Transaction ID: B183839</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 7
Mailing Address 128 North Columbus Street		Amount of Each Disbursement this Period 500.00
City Alexandria State VA Zip Code 33214	Purpose of Disbursement O-2007 Federal PAC DC Candidate Name 011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) <b>B. Rush Holt for Congress</b>		<b>Transaction ID: B183841</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 7
Mailing Address P.O. Box 782		Amount of Each Disbursement this Period 1000.00
City Pennington State NJ Zip Code 08534	Purpose of Disbursement P-2008 U.S. House 12 NJ Candidate Name Rush D Holt 011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 12	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Whitfield for Congress</b>		<b>Transaction ID: B183843</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 7
Mailing Address 217 Third Street SE		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20003	Purpose of Disbursement P-2008 U.S. House 01 KY Candidate Name Edward Whitfield 011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Andrews for Congress</b>		Transaction ID: B183844 Date of Disbursement 08 / 31 / 2007
Mailing Address P.O. Box 295		Amount of Each Disbursement this Period 1000.00
City Oaklyn State NJ Zip Code 08107	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. House 01 NJ		
Candidate Name Robert Andrews		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Frelinghuysen for Congress</b>		Transaction ID: B183845 Date of Disbursement 08 / 31 / 2007
Mailing Address P.O. Box 29576		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20017	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. House 11 NJ		
Candidate Name Rodney P Frelinghuysen		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 11	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Alexander for Senate 2008</b>		Transaction ID: B183846 Date of Disbursement 08 / 31 / 2007
Mailing Address 101 Constitution Ave. NW Suite 80		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20001	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. Senate TN		
Candidate Name Lamar Alexander		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Carolyn Kilpatrick for Congress</b>		<b>Transaction ID: B183847</b> Date of Disbursement 08 / 31 / 2007	
Mailing Address 499 S. Capitol St. SW Suite 404		Amount of Each Disbursement this Period 1000.00	
City Washington State DC Zip Code 20003	Purpose of Disbursement P-2008 U.S. House 13 MI	011 Category/Type	
Candidate Name Carolyn Cheeks Kilpatrick	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 13		

Full Name (Last, First, Middle Initial) <b>B. The Dole Leadership Trust</b>		<b>Transaction ID: B183849</b> Date of Disbursement 08 / 31 / 2007	
Mailing Address P.O. Box 510		Amount of Each Disbursement this Period 5000.00	
City Raleigh State NC Zip Code 27602	Purpose of Disbursement O-2007 Federal PAC FD	011 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: FD District: Not Applicable		

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

6000.00

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

39000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Election Fund of Kip Bateman</b>		<b>Transaction ID: B181633</b> Date of Disbursement 08 / 03 / 2007
Mailing Address P.O. Box 701		Amount of Each Disbursement this Period 250.00
City Somerville	State NJ	
Zip Code 08876	Purpose of Disbursement P-2008 State House 16 NJ	
Candidate Name Christopher Bateman	Category/ Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 16		

Full Name (Last, First, Middle Initial) <b>B. Sean Kean for Senate</b>		<b>Transaction ID: B181634</b> Date of Disbursement 08 / 03 / 2007
Mailing Address 100 Begonia Ct.		Amount of Each Disbursement this Period 300.00
City Jackson	State NJ	
Zip Code 08527	Purpose of Disbursement P-2008 State Senate 11 NJ	
Candidate Name Sean Kean	Category/ Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 11		

Full Name (Last, First, Middle Initial) <b>C. Friends of Jim Raussen</b>		<b>Transaction ID: B183838</b> Date of Disbursement 08 / 31 / 2007
Mailing Address 661 Park Avenue		Amount of Each Disbursement this Period 250.00
City Cincinnati	State OH	
Zip Code 45246	Purpose of Disbursement P-2008 State House 28 OH	
Candidate Name Jim Raussen	Category/ Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 28		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	800.00



Form/Schedule: SA11A1

Transaction ID:

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