

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** **CITY** **STATE** **ZIP CODE**
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 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / 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 / / through / /

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 Daniel P. Casserly

Signature of Treasurer *Daniel P. Casserly* [Electronically Filed] Date / /

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**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Novartis Corporation Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		132644.07
(b) Cash on Hand at Beginning of Reporting Period.....	106563.37	
(c) Total Receipts (from Line 19)	25644.78	105964.08
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	132208.15	238608.15
7. Total Disbursements (from Line 31).....	31715.00	138115.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	100493.15	100493.15
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY 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: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5303.74	15271.80
(ii) Unitemized	20341.04	90442.28
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	25644.78	105714.08
(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)	25644.78	105714.08
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	250.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	25644.78	105964.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	25644.78	105964.08

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	15.00	1015.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	15.00	1015.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28500.00	137000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	3200.00	100.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	31715.00	138115.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31715.00	138115.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	25644.78	105714.08
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25644.78	105714.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	15.00	1015.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	250.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15.00	765.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 27
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) A. Tracy L Baroni Allmon		Date of Receipt MM / DD / YYYY 04 / 29 / 2011 Transaction ID : A2011-963244
Mailing Address One Health Plaza		Amount of Each Receipt this Period 100.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Novartis Pharmaceuticals	Occupation Exec Dir Public Health Policy
Receipt For: <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. Michael Beck		Date of Receipt MM / DD / YYYY 04 / 29 / 2011 Transaction ID : A2011-962555
Mailing Address One Health Plaza		Amount of Each Receipt this Period 75.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Novartis Pharmaceuticals	Occupation Assoc Dir Reg Strat & Bus Plan
Receipt For: <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) C. Peri K Bonner		Date of Receipt MM / DD / YYYY 04 / 29 / 2011 Transaction ID : A2011-962076
Mailing Address One Health Plaza		Amount of Each Receipt this Period 58.99
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Novartis Pharmaceuticals	Occupation Asc Dir Regl Accts Proj
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.18	

SUBTOTAL of Receipts This Page (optional).....▶	233.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Thomas R Brunner
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Director Systems Planning and
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2011
Transaction ID : A2011-962750
 Amount of Each Receipt this Period
60.00

B. James P Carey
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Services Incorporated Occupation VP Health Policy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **397.24**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2011
Transaction ID : A2011-962547
 Amount of Each Receipt this Period
102.08

C. Daniel P Casserly
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Services Incorporated Occupation VP Fed'l Govt Rel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2011
Transaction ID : A2011-962110
 Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....▶	462.08
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 27
<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. Steven J Catalano
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **346.68**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : A2011-962574

Amount of Each Receipt this Period
86.67

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Asc Director Gov't Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **223.56**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : A2011-961841

Amount of Each Receipt this Period
56.58

c. Mary L Coen
Full Name (Last, First, Middle Initial)

Mailing Address Vaccine Headquarters 350 Massachus

City Cambridge State MA Zip Code 02139-4182

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

Name of Employer COMMERCIAL OPS-PRIM CARE ANDSPEC Occupation Exec Dir US Gov't Affairs & Public

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 08 / 2011

Transaction ID : A2011-608894

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	393.25
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : A2011-608894

Please note that this report is being amended to correct an error in the YTD aggregate amount for Mary Coen on line 11a(i).

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
	<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. Julie A Collins
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer CIBA Vision Corporation Occupation Sr Dir Con&Prof Mktg

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : A2011-961697

Amount of Each Receipt this Period
100.00

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Dir Life Cycle Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : A2011-962027

Amount of Each Receipt this Period
60.00

C. Candace B Dibblee
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Services Incorporated Occupation Asc Dir Fed'l Leg Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : A2011-962445

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	410.00
TOTAL This Period (last page this line number only).....▶	

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

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

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

Full Name (Last, First, Middle Initial) A. James R Elkin		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 29 / 2011 Transaction ID : A2011-961890
Mailing Address One Health Plaza		Amount of Each Receipt this Period 416.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Novartis Services Incorporated	Occupation VP Head US Public Affairs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1664.00	

Full Name (Last, First, Middle Initial) B. David R Epstein		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 29 / 2011 Transaction ID : A2011-962336
Mailing Address One Health Plaza		Amount of Each Receipt this Period 100.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Novartis Services Incorporated	Occupation Head Pharma AG
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) C. Christopher Esposito		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 29 / 2011 Transaction ID : A2011-962580
Mailing Address One Health Plaza		Amount of Each Receipt this Period 75.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Novartis Pharmaceuticals	Occupation Managing Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	591.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 27
	<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. H. P Frederick
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Senior District Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **214.24**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : A2011-962194

Amount of Each Receipt this Period
54.35

B. Neely T Frye
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Asc Director Gov't Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.34**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : A2011-962236

Amount of Each Receipt this Period
125.06

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Services Incorporated Occupation VP Auditing NA Region

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : A2011-962084

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **279.41**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 27
	<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. Debbie L Henderson
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation VP Business Unit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2011
Transaction ID : A2011-962705
 Amount of Each Receipt this Period
 75.00

B. Sheldon Jones
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Services Incorporated Occupation Global Head of Corp Comm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 604.02

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2011
Transaction ID : A2011-961874
 Amount of Each Receipt this Period
 155.77

C. Richard E Knapp
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Executive Director State Gov'
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2011
Transaction ID : A2011-962037
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	430.77
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 27
<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. Richard E Lemire
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Head of Engineering

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **356.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : A2011-961715

Amount of Each Receipt this Period
90.54

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Services Incorporated Occupation VP Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1664.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : A2011-961887

Amount of Each Receipt this Period
416.00

c. Mary L Manning
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Executive Product Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.32**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : A2011-962615

Amount of Each Receipt this Period
83.33

SUBTOTAL of Receipts This Page (optional).....▶	589.87
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 27
(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. Catharine M McGeehan
Full Name (Last, First, Middle Initial)
Mailing Address One Health Plaza
City East Hanover State NJ Zip Code 07936
FEC ID number of contributing federal political committee. **C**
Name of Employer Novartis Pharmaceuticals Occupation Asc Director Gov't Relations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2011
Transaction ID : A2011-962067
Amount of Each Receipt this Period
75.00

B. William D McLaury
Full Name (Last, First, Middle Initial)
Mailing Address One Health Plaza
City East Hanover State NJ Zip Code 07936
FEC ID number of contributing federal political committee. **C**
Name of Employer Novartis Pharmaceuticals Occupation Exec Dir Supply Chain Mngmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2011
Transaction ID : A2011-962111
Amount of Each Receipt this Period
100.00

C. Brian J McNamara
Full Name (Last, First, Middle Initial)
Mailing Address One Health Plaza
City East Hanover State NJ Zip Code 07936
FEC ID number of contributing federal political committee. **C**
Name of Employer Novartis Consumer Health Inc. Occupation OTC Region BU Head Americas
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2011
Transaction ID : A2011-961689
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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

Full Name (Last, First, Middle Initial) A. Wayne P Merkelson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 29 / 2011 Transaction ID : A2011-962379
Mailing Address One Health Plaza		Amount of Each Receipt this Period 75.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Finance Corporation	Occupation VP Tax Law	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Glenn H Morton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 29 / 2011 Transaction ID : A2011-962264
Mailing Address One Health Plaza		Amount of Each Receipt this Period 156.12
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation ED IT Risk and Compliance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 621.38	

Full Name (Last, First, Middle Initial) C. Marion T Morton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 29 / 2011 Transaction ID : A2011-962363
Mailing Address One Health Plaza		Amount of Each Receipt this Period 100.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation VP Business Unit	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	331.12
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 27
<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. Vas Narasimhan
 Full Name (Last, First, Middle Initial)
 Mailing Address 350 Massachusetts Ave
 350 MA # 222
 City Cambridge State MA Zip Code 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Vaccines & Diagnostics Occupation Region Head of North America
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2011
Transaction ID : A2011-608833
 Amount of Each Receipt this Period
 100.00

B. John Chong Neal
 Full Name (Last, First, Middle Initial)
 Mailing Address 350 Massachusetts Ave
 350 MA # 212F
 City Cambridge State MA Zip Code 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Vaccines & Diagnostics Occupation Dir Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2011
Transaction ID : A2011-608836
 Amount of Each Receipt this Period
 70.00

c. Shawn O'Neail
 Full Name (Last, First, Middle Initial)
 Mailing Address 608 Fifth Avenue
 City New York State NY Zip Code 10020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Services Incorporated Occupation Ex Dir Fed Leg Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2011
Transaction ID : A2011-963248
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	270.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 27
<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. Paul G Pochtar
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation VP Oncology Managed Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **530.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : A2011-962303

Amount of Each Receipt this Period
100.00

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

Mailing Address 608 Fifth Avenue

City New York State NY Zip Code 10020

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

Name of Employer Novartis Corporation Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 08 / 2011

Transaction ID : A2011-608831

Amount of Each Receipt this Period
80.00

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Sr Account Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **239.12**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : A2011-961829

Amount of Each Receipt this Period
59.78

SUBTOTAL of Receipts This Page (optional).....▶	239.78
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 27
	<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. Katherine E Solon		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID : A2011-963022
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Novartis Services Incorporated	Ex Dir Fed Leg Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lisa A Steelman		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID : A2011-961741
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="115.00"/>
Name of Employer	Occupation	
Novartis Pharmaceuticals	Director State Gov't Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="460.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Donald P Stevens		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID : A2011-961914
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>
Name of Employer	Occupation	
Novartis Pharmaceuticals	Director State Gov't Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="440.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 27
	<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. Stacey J Tannenbaum
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Expert Modeler
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2011
Transaction ID : A2011-962934
 Amount of Each Receipt this Period
 65.00

B. Barbara A Tombros
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Dir Strategic Alliance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2011
Transaction ID : A2011-962290
 Amount of Each Receipt this Period
 74.07

C. Christina M Tremains
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Sr Business Relationship Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2011
Transaction ID : A2011-962497
 Amount of Each Receipt this Period
 65.21

SUBTOTAL of Receipts This Page (optional).....▶	204.28
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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. Andrew J Volante		Date of Receipt M M / D D / Y Y Y Y Y 04 / 29 / 2011 Transaction ID : A2011-962201
Mailing Address One Health Plaza		Amount of Each Receipt this Period 100.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation VP Bus Franchise Oncology	
Receipt For: <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. Jane E Welborn		Date of Receipt M M / D D / Y Y Y Y Y 04 / 29 / 2011 Transaction ID : A2011-961946
Mailing Address One Health Plaza		Amount of Each Receipt this Period 53.19
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation Sr Oncol Area Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.72	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	153.19
TOTAL This Period (last page this line number only).....▶	5303.74

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Anna Eshoo for Congress

Mailing Address P.O. Box 636

City Annandale State VA Zip Code 22003

Purpose of Disbursement
Contribution

011

Candidate Name

Anna Eshoo

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID : B383519

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Price for Congress

Mailing Address P.O. Box 425

City Roswell State GA Zip Code 30077

Purpose of Disbursement
Contribution

011

Candidate Name

Thomas E Price

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: GA District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID : B383518

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. The Madison PAC

Mailing Address 50 E Street SE - Suite 1

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID : B383520

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

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

8	5	0	0	0	0	0	0	0	0

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

8	5	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hoyer for Congress

Mailing Address 4201 Northview Dr. Suite 307

City Bowie State MD Zip Code 20716

Purpose of Disbursement Contribution

011

Candidate Name

Steny H Hoyer

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: MD District: 05

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2011

Transaction ID : B383926

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. TRUST PAC

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement Contribution

011

Candidate Name

Office Sought: House Senate President

Disbursement For: 2011 Primary General Other (specify) ▼ Not Applicable

State: MI District:

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2011

Transaction ID : B383527

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Rogers for Congress

Mailing Address 700 12th St. NW Suite 700

City Washington State DC Zip Code 20005

Purpose of Disbursement Contribution

011

Candidate Name

Mike J Rogers

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: MI District: 08

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2011

Transaction ID : B383932

Amount of Each Disbursement this Period

2500.00

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

10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Next Century Fund

Mailing Address 116 South Royal Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President
State: NC District:

Disbursement For: 2011
 Primary General
 Other (specify) ▼ Not Applicable

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 25 / 2011

Transaction ID : B383517

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Adrian Smith for Congress

Mailing Address 3321 Avenue I Suite 6

City Scottsbluff State NE Zip Code 69361

Purpose of Disbursement Contribution

Candidate Name

Adrian Smith

Office Sought: House Senate President
State: NE District: 03

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2011

Transaction ID : B383937

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Menendez for Senate

Mailing Address 236 Massachusetts Ave. NE Suite 6

City Washington State DC Zip Code 20002

Purpose of Disbursement Contribution

Candidate Name

Robert Menendez

Office Sought: House Senate President
State: NJ District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2011

Transaction ID : B383933

Amount of Each Disbursement this Period

2500.00

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

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

5000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. New Pioneers PAC

Mailing Address 228 S. Washington St. Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼
Not Applicable

State: OR District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	25	/	2011

Transaction ID : B383516

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

5000.00

28500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. ND House and Senate Repub Caucuses

Mailing Address 1899 Bonn Blvd.

City Bismarck State ND Zip Code 58502

Purpose of Disbursement
State Party Cmte

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2011

Transaction ID : B383914

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. People to Elect Matt Baker

Mailing Address P.O. Box 602

City Wellsboro State PA Zip Code 16901

Purpose of Disbursement
P-2012 State House 68 PA

011

Candidate Name

Matt Baker

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2011

Transaction ID : B383959

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Committee to Elect Joe Emrick

Mailing Address 2312 Blue Jay Drive

City Nazareth State PA Zip Code 18064

Purpose of Disbursement
P-2012 State House 137 PA

011

Candidate Name

Joe Emrick

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2011

Transaction ID : B383962

Amount of Each Disbursement this Period

200.00

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

900.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens to Elect John Payne

Mailing Address PO Box 651

City State Zip Code
Hershey PA 17033

Purpose of Disbursement
P-2012 State House 106 PA

011

Category/
Type

Candidate Name
John Payne

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : B383938

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Marguerite Quinn

Mailing Address P.O. Box 58

City State Zip Code
Doylestown PA 18901

Purpose of Disbursement
P-2012 State House 143 PA

011

Category/
Type

Candidate Name
Marguerite Quinn

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : B383941

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. Friends of Joe Scarnati

Mailing Address 224 Pine Street

City State Zip Code
Harrisburg PA 17101

Purpose of Disbursement
P-2012 State Senate 25 PA

011

Category/
Type

Candidate Name
Joseph B Scarnati III

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 29 / 2011

Transaction ID : B383940

Amount of Each Disbursement this Period

1000.00

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

2300.00

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

3200.00