

# 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 04 01 2011 through 04 30 2011

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 05 17 2011

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Novartis Corporation Political Action Committee

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		132644.07
X	Y	Y	Y							
2	0	1	1							
(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 <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	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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 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)) .....	25644.78	105964.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	25644.78	105964.08

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(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 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	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) 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))..	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

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: PAGE 6 / 26  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Tracy L Baroni Allmon

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  
0 4 / 2 9 / 2 0 1 1

**Transaction ID:** A2011-963244

Amount of Each Receipt this Period 100.00

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

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 M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

**Transaction ID:** A2011-962555

Amount of Each Receipt this Period 75.00

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 233.18

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

**Transaction ID:** A2011-962076

Amount of Each Receipt this Period 58.99

**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: PAGE 7 / 26  
(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) Thomas R Brunner		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	9		2	0	1	1													
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2011-962750																				
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 <table border="1" style="width: 100%; text-align: right;"><tr><td>60.00</td></tr></table>	60.00																			
60.00																						
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 ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>240.00</td></tr></table>	240.00																				
240.00																						

**B.**

Full Name (Last, First, Middle Initial) James P Carey		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	9		2	0	1	1													
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2011-962547																				
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 <table border="1" style="width: 100%; text-align: right;"><tr><td>102.08</td></tr></table>	102.08																			
102.08																						
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 ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>397.24</td></tr></table>	397.24																				
397.24																						

**C.**

Full Name (Last, First, Middle Initial) Daniel P Casserly		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	9		2	0	1	1													
Mailing Address One Health Plaza		<b>Transaction ID:</b> A2011-962110																				
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 <table border="1" style="width: 100%; text-align: right;"><tr><td>300.00</td></tr></table>	300.00																			
300.00																						
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 ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>1100.00</td></tr></table>	1100.00																				
1100.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1" style="width: 100%;"><tr><td>462.08</td></tr></table>	462.08
462.08		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 26  
(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)  
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 ▼ 346.68

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2011

**Transaction ID:** A2011-962574

Amount of Each Receipt this Period  
86.67

**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 ▼ 223.56

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2011

**Transaction ID:** A2011-961841

Amount of Each Receipt this Period  
56.58

**C.**

Full Name (Last, First, Middle Initial)  
Mary Coen

Mailing Address 608 Fifth Avenue

City State Zip Code  
New York NY 10020

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

Name of Employer Occupation  
Novartis Corporation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
MM / DD / YYYY  
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) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 26

(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)

Julie A Collins

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  
CIBA Vision Corporation Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: A2011-961697

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Eric Dammeyer

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  
0 4 / 2 9 / 2 0 1 1

Transaction ID: A2011-962027

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Candace B Dibblee

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 ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

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: PAGE 10 / 26

(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)  
James R Elkin

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Services Incorporated Executive

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1664.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: A2011-961890

Amount of Each Receipt this Period

416.00

**B.**

Full Name (Last, First, Middle Initial)  
David R Epstein

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) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: A2011-962336

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Christopher Esposito

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) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: A2011-962580

Amount of Each Receipt this Period

75.00

**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: PAGE 11 / 26

(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)  
H. P Frederick

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 214.24

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: A2011-962194

Amount of Each Receipt this Period

54.35

**B.**

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

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 ▼ 495.34

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: A2011-962236

Amount of Each Receipt this Period

125.06

**C.**

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

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Services Incorporated Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

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: PAGE 12 / 26  
(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)  
Debbie L Henderson

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

**Transaction ID:** A2011-962705

Amount of Each Receipt this Period  
75.00

**B.**

Full Name (Last, First, Middle Initial)  
Sheldon Jones

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 ▼ 604.02

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

**Transaction ID:** A2011-961874

Amount of Each Receipt this Period  
155.77

**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 ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

**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: PAGE 13 / 26  
(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)  
Richard E Lemire

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharma Suffern Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 356.88

Date of Receipt: 04 / 29 / 2011  
Transaction ID: A2011-961715  
Amount of Each Receipt this Period: 90.54

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Services Incorporated Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1664.00

Date of Receipt: 04 / 29 / 2011  
Transaction ID: A2011-961887  
Amount of Each Receipt this Period: 416.00

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

Mailing 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 ▼ 333.32

Date of Receipt: 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 14 / 26  
(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)  
Catharine M McGeehan

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  
MM / DD / YYYY  
04 / 29 / 2011

**Transaction ID:** A2011-962067

Amount of Each Receipt this Period  
75.00

**B.**

Full Name (Last, First, Middle Initial)  
William D McLaury

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  
MM / DD / YYYY  
04 / 29 / 2011

**Transaction ID:** A2011-962111

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Brian J McNamara

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 Consumer Health Inc. Sr. Vice President OTC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
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: PAGE 15 / 26  
(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)  
Wayne P Merkelson

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer: Novartis Finance Corporation  
Occupation: Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt: 04 / 29 / 2011  
Transaction ID: A2011-962379  
Amount of Each Receipt this Period: 75.00

**B.** 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: Novartis Pharmaceuticals  
Occupation: Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
621.38

Date of Receipt: 04 / 29 / 2011  
Transaction ID: A2011-962264  
Amount of Each Receipt this Period: 156.12

**C.** 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: Novartis Pharmaceuticals  
Occupation: Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt: 04 / 29 / 2011  
Transaction ID: A2011-962363  
Amount of Each Receipt this Period: 100.00

**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: PAGE 16 / 26  
(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)  
Vas Narasimhan

Mailing Address 350 Massachusetts Ave  
350 MA # 222

City State Zip Code  
Cambridge MA 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: 04 / 08 / 2011  
Transaction ID: A2011-608833  
Amount of Each Receipt this Period: 100.00

**B.**

Full Name (Last, First, Middle Initial)  
John Chong Neal

Mailing Address 350 Massachusetts Ave  
350 MA # 212F

City State Zip Code  
Cambridge MA 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: 04 / 08 / 2011  
Transaction ID: A2011-608836  
Amount of Each Receipt this Period: 70.00

**C.**

Full Name (Last, First, Middle Initial)  
Shawn O'Neal

Mailing Address 14491 Creek Branch Ct

City State Zip Code  
Fairfax VA 20120

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

Name of Employer: COMMERCIAL OPS-PRIM CARE ANDSPEC  
Occupation: Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt: 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 17 / 26
	<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) Paul G Pochtar		Date of Receipt	
	Mailing Address One Health Plaza		M M / D D / Y Y Y Y Y 0 4 / 2 9 / 2 0 1 1	
	City	State	Zip Code	<b>Transaction ID:</b> A2011-962303
	East Hanover	NJ	07936	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		100.00	
	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 ▼ 530.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Bruce Ruscio		Date of Receipt	
	Mailing Address 608 Fifth Avenue		M M / D D / Y Y Y Y Y 0 4 / 0 8 / 2 0 1 1	
	City	State	Zip Code	<b>Transaction ID:</b> A2011-608831
	New York	NY	10020	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		80.00	
	Name of Employer Novartis Corporation		Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Jason T Russell		Date of Receipt	
	Mailing Address One Health Plaza		M M / D D / Y Y Y Y Y 0 4 / 2 9 / 2 0 1 1	
	City	State	Zip Code	<b>Transaction ID:</b> A2011-961829
	East Hanover	NJ	07936	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		59.78	
	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 ▼ 239.12		

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 26

(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)  
Katherine E Solon

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) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: A2011-963022

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Lisa A Steelman

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 460.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: A2011-961741

Amount of Each Receipt this Period

115.00

**C.**

Full Name (Last, First, Middle Initial)  
Donald P Stevens

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) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 1

Transaction ID: A2011-961914

Amount of Each Receipt this Period

75.00

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

440.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 26  
(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)  
Stacey J Tannenbaum

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 ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2011

**Transaction ID:** A2011-962934

Amount of Each Receipt this Period  
65.00

**B.**

Full Name (Last, First, Middle Initial)  
Barbara A Tombros

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 ▼ 294.10

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2011

**Transaction ID:** A2011-962290

Amount of Each Receipt this Period  
74.07

**C.**

Full Name (Last, First, Middle Initial)  
Christina M Tremains

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 257.66

Date of Receipt  
MM / DD / YYYY  
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:	PAGE 20 / 26
	(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)  
Andrew J Volante

Mailing Address One Health Plaza

City State Zip Code  
East Hanover NJ 07936

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

Name of Employer Occupation  
Novartis Pharmaceuticals Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2011

**Transaction ID:** A2011-962201

Amount of Each Receipt this Period  
100.00

**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 ▼  
211.72

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2011

**Transaction ID:** A2011-961946

Amount of Each Receipt this Period  
53.19

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	153.19
<b>TOTAL</b> 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)

PAGE 21 / 26

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Anna Eshoo for Congress</p> <p>Mailing Address P.O. Box 636</p> <p>City Annandale State VA Zip Code 22003</p> <p>Purpose of Disbursement Contribution Candidate Name Anna Eshoo</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 14</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B383519 <b>Date of Disbursement</b> 04 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Price for Congress</p> <p>Mailing Address P.O. Box 425</p> <p>City Roswell State GA Zip Code 30077</p> <p>Purpose of Disbursement Contribution Candidate Name Thomas E Price</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 06</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B383518 <b>Date of Disbursement</b> 04 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Madison PAC</p> <p>Mailing Address 50 E Street SE - Suite 1</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B383520 <b>Date of Disbursement</b> 04 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>

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

8500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 26

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Hoyer for Congress</p> <p>Mailing Address 4201 Northview Dr. Suite 307</p> <p>City Bowie State MD Zip Code 20716</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Steny H Hoyer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MD District: 05</p>	<p><b>Transaction ID:</b> B383926 <b>Date of Disbursement:</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	1	1	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	9		2	0	1	1													
2500.00																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) TRUST PAC</p> <p>Mailing Address 104 Hume Avenue</p> <p>City Alexandria State VA Zip Code 22301</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: MI District: Not Applicable</p>	<p><b>Transaction ID:</b> B383527 <b>Date of Disbursement:</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>5000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	1	1	5000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	9		2	0	1	1													
5000.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Rogers for Congress</p> <p>Mailing Address 700 12th St. NW Suite 700</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Mike J Rogers</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 08</p>	<p><b>Transaction ID:</b> B383932 <b>Date of Disbursement:</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	1	1	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	9		2	0	1	1													
2500.00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>10000.00</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)

PAGE 23 / 26

<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

A.	Full Name (Last, First, Middle Initial) Next Century Fund	Transaction ID: B383517 Date of Disbursement
	Mailing Address 116 South Royal Street	<input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2011"/>
	City State Zip Code Alexandria VA 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1500.00"/>
	Candidate Name	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) Adrian Smith for Congress	Transaction ID: B383937 Date of Disbursement
	Mailing Address 3321 Avenue I Suite 6	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
	City State Zip Code Scottsbluff NE 69361	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Adrian Smith	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 03	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Menendez for Senate	Transaction ID: B383933 Date of Disbursement
	Mailing Address 236 Massachusetts Ave. NE Suite 6	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
	City State Zip Code Washington DC 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2500.00"/>
	Candidate Name Robert Menendez	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 24 / 26

<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

A.

Full Name (Last, First, Middle Initial)  
New Pioneers PAC

Mailing Address 228 S. Washington St. Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: OR District:

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼

Not Applicable

Transaction ID: B383516

Date of Disbursement

04 / 25 / 2011

Amount of Each Disbursement this Period

5000.00

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

5000.00

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

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

**A.** Full Name (Last, First, Middle Initial)  
ND House and Senate Repub Caucuses

Mailing Address 1899 Bonn Blvd.

City Bismarck State ND Zip Code 58502

Purpose of Disbursement  
State Party Cmte

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼

State: District:

Not Applicable

Transaction ID: B383914

Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

200.00

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

Candidate Name  
Matt Baker

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B383959

Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

500.00

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

Candidate Name  
Joe Emrick

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B383962

Date of Disbursement

04 / 29 / 2011

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

A.	Full Name (Last, First, Middle Initial) Citizens to Elect John Payne	Transaction ID: B383938 Date of Disbursement
	Mailing Address PO Box 651	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
	City Hershey State PA Zip Code 17033	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2012 State House 106 PA	<input type="text" value="1000.00"/>
	Candidate Name John Payne	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Friends of Marguerite Quinn	Transaction ID: B383941 Date of Disbursement
	Mailing Address P.O. Box 58	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
	City Doylestown State PA Zip Code 18901	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2012 State House 143 PA	<input type="text" value="300.00"/>
	Candidate Name Marguerite Quinn	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Friends of Joe Scarnati	Transaction ID: B383940 Date of Disbursement
	Mailing Address 224 Pine Street	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
	City Harrisburg State PA Zip Code 17101	Amount of Each Disbursement this Period
	Purpose of Disbursement P-2012 State Senate 25 PA	<input type="text" value="1000.00"/>
	Candidate Name Joseph B Scarnati, III	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2300.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="3200.00"/>