

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 03 01 2008 through 03 31 2008

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 04 17 2008

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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Novartis Corporation Political Action Committee

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		168691.33
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	149198.66									
(c) Total Receipts (from Line 19)	28715.08	88072.41								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	177913.74	256763.74								
7. Total Disbursements (from Line 31)	38500.00	117350.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	139413.74	139413.74								
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:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	7432.98	15662.10
(i) Itemized (use Schedule A)		
(ii) Unitemized	21282.10	72410.31
(iii) TOTAL (add Lines 11(a)(i) and (ii)	28715.08	88072.41
(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)	28715.08	88072.41
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	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))	28715.08	88072.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	28715.08	88072.41

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	350.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	350.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	37500.00	114500.00
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.....	1000.00	2500.00
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))..	38500.00	117350.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	38500.00	117350.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	28715.08	88072.41
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28715.08	88072.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	350.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	350.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 30
(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

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

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

Mailing 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 ▼ 225.00

Date of Receipt: 03 / 20 / 2008
Transaction ID: A2008-524318
Amount of Each Receipt this Period: 75.00

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

Mailing 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 ▼ 1248.00

Date of Receipt: 03 / 20 / 2008
Transaction ID: A2008-523440
Amount of Each Receipt this Period: 416.00

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

Mailing 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 ▼ 450.00

Date of Receipt: 03 / 20 / 2008
Transaction ID: A2008-524060
Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) ▶ 641.00

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 7 / 30
(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

<p>A. Full Name (Last, First, Middle Initial) Catherine T Burton</p> <p>Mailing Address One Health Plaza</p> <p>City State Zip Code East Hanover NJ 07936</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Novartis Pharmaceuticals Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 544.43</p>	<p>Date of Receipt 03 / 20 / 2008</p> <p>Transaction ID: A2008-524296</p> <p>Amount of Each Receipt this Period 185.07</p>
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<p>B. Full Name (Last, First, Middle Initial) Ronald M Califre</p> <p>Mailing Address One Health Plaza</p> <p>City State Zip Code East Hanover NJ 07936</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Novartis Pharmaceuticals Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1248.00</p>	<p>Date of Receipt 03 / 20 / 2008</p> <p>Transaction ID: A2008-524065</p> <p>Amount of Each Receipt this Period 416.00</p>
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<p>C. Full Name (Last, First, Middle Initial) James P Carey</p> <p>Mailing Address One Health Plaza</p> <p>City State Zip Code East Hanover NJ 07936</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Novartis Pharmaceuticals Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 223.73</p>	<p>Date of Receipt 03 / 20 / 2008</p> <p>Transaction ID: A2008-524308</p> <p>Amount of Each Receipt this Period 76.25</p>
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SUBTOTAL of Receipts This Page (optional)	677.32
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 8 / 30

(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)
Daniel P Casserly

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Services Incorporated Executive

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2008

Transaction ID: A2008-523770

Amount of Each Receipt this Period

200.00

B.

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: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 254.67

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2008

Transaction ID: A2008-524339

Amount of Each Receipt this Period

86.67

C.

Full Name (Last, First, Middle Initial)
Paulo F Costa

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Services Incorporated Executive

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1248.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2008

Transaction ID: A2008-523215

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

702.67

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 / 30
(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)
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: Novartis Services Incorporated
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.66

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: A2008-524178

Amount of Each Receipt this Period
77.78

B. Full Name (Last, First, Middle Initial)
David P Drake

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer: Novartis Services Incorporated
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
498.96

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: A2008-523985

Amount of Each Receipt this Period
170.94

C. 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: Novartis Services Incorporated
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: A2008-523443

Amount of Each Receipt this Period
416.00

SUBTOTAL of Receipts This Page (optional)	664.72
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 / 30
(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 A Engelhardt

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 ▼ 564.06

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: A2008-524038

Amount of Each Receipt this Period
188.02

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 Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: A2008-524040

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: A2008-524344

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **363.02**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 30
(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)
Eric W Evans

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
03 / 20 / 2008

Transaction ID: A2008-524672

Amount of Each Receipt this Period
100.00

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 ▼ 336.11

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: A2008-523928

Amount of Each Receipt this Period
115.01

C. Full Name (Last, First, Middle Initial)
Thomas E Giles

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 ▼ 525.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: A2008-524091

Amount of Each Receipt this Period
175.00

SUBTOTAL of Receipts This Page (optional) ▶ **390.01**

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 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Robert Gines	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address One Health Plaza	Transaction ID: A2008-523738
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Services Incorporated Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

B.	Full Name (Last, First, Middle Initial) Mark D Grebenaus	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address One Health Plaza	Transaction ID: A2008-524340
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 155.24
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.16

C.	Full Name (Last, First, Middle Initial) Sheldon Jones	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address One Health Plaza	Transaction ID: A2008-523423
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 76.89
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Finance Corporation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.75

SUBTOTAL of Receipts This Page (optional)	332.13
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 / 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Michael E Kehoe	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address One Health Plaza	Transaction ID: A2008-496065
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 92.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Corporation staff	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.50	

B.	Full Name (Last, First, Middle Initial) Michael E Kehoe	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address One Health Plaza	Transaction ID: A2008-496073
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 92.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Corporation staff	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 553.80	

C.	Full Name (Last, First, Middle Initial) Richard E Knapp	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address One Health Plaza	Transaction ID: A2008-523668
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	384.60
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 / 30

(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 State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharma Suffern Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.30

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2008

Transaction ID: A2008-523227

Amount of Each Receipt this Period
80.50

B.

Full Name (Last, First, Middle Initial)
Lon D Lowrey

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 ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2008

Transaction ID: A2008-523413

Amount of Each Receipt this Period
125.00

C.

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

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 249.99

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2008

Transaction ID: A2008-524392

Amount of Each Receipt this Period
83.33

SUBTOTAL of Receipts This Page (optional) ▶

288.83

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 15 / 30
	<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) William D Mc Laury	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address One Health Plaza	Transaction ID: A2008-523771
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Catharine M McGeehan	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address One Health Plaza	Transaction ID: A2008-523708
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) Brian McNamara	Date of Receipt MM / DD / YYYY 03 / 14 / 2008
	Mailing Address One Health Plaza	Transaction ID: A2008-537996
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Sr. Vice President OTC Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	225.00
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 16 / 30

(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)
Brian 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 Pharmaceuticals Sr. Vice President OTC

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 3 / 3 1 / 2 0 0 8

Transaction ID: A2008-537999

Amount of Each Receipt this Period

50.00

B.

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 Occupation
Novartis Finance Corporation Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 8

Transaction ID: A2008-524096

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
Kathryn C Metcalfe

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 8

Transaction ID: A2008-524393

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional) ▶

325.00

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 / 30
	<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) Glenn H Morton	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address One Health Plaza	Transaction ID: A2008-523956
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 146.42
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 429.34	

B.	Full Name (Last, First, Middle Initial) Marion T Morton	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address One Health Plaza	Transaction ID: A2008-524075
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Kathleen P Murphy	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address One Health Plaza	Transaction ID: A2008-524082
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 158.79
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 467.13	

SUBTOTAL of Receipts This Page (optional)	▶	405.21
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 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Urs A Naegelin	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address One Health Plaza	Transaction ID: A2008-523844
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Services Incorporated Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 300.00	

B.	Full Name (Last, First, Middle Initial) Raymond Pawlicki	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address One Health Plaza	Transaction ID: A2008-524054
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 300.00	

C.	Full Name (Last, First, Middle Initial) Paul G Pochtar	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address One Health Plaza	Transaction ID: A2008-523999
	City State Zip Code East Hanover NJ 07936	Amount of Each Receipt this Period 223.26
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Novartis Pharmaceuticals Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 649.34	

SUBTOTAL of Receipts This Page (optional)	423.26
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 / 30
(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)
Kevin T Rigby

Mailing 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 ▼ 600.00

Date of Receipt: 03 / 20 / 2008
Transaction ID: A2008-524051
Amount of Each Receipt this Period: 200.00

B.

Full Name (Last, First, Middle Initial)
Gary E Rosenthal

Mailing 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 ▼ 1248.00

Date of Receipt: 03 / 20 / 2008
Transaction ID: A2008-524149
Amount of Each Receipt this Period: 416.00

C.

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

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 ▼ 301.52

Date of Receipt: 03 / 14 / 2008
Transaction ID: A2008-538565
Amount of Each Receipt this Period: 36.92

SUBTOTAL of Receipts This Page (optional) ▶ 652.92

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 / 30
(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)
Bruce Ruscio

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 ▼ 338.44

Date of Receipt
MM / DD / YYYY
03 / 28 / 2008

Transaction ID: A2008-522771

Amount of Each Receipt this Period
36.92

B.

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

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Pharmaceuticals Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: A2008-523266

Amount of Each Receipt this Period
75.00

C.

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 470.72

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: A2008-524980

Amount of Each Receipt this Period
160.22

SUBTOTAL of Receipts This Page (optional) ► **272.14**

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 21 / 30
(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)
Lisa A Steelman

Mailing 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 ▼ 345.00

Date of Receipt: 03 / 20 / 2008
Transaction ID: A2008-523252
Amount of Each Receipt this Period: 115.00

B.

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

Mailing 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 ▼ 225.00

Date of Receipt: 03 / 20 / 2008
Transaction ID: A2008-523482
Amount of Each Receipt this Period: 75.00

C.

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

Mailing 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 ▼ 205.83

Date of Receipt: 03 / 20 / 2008
Transaction ID: A2008-523984
Amount of Each Receipt this Period: 70.15

SUBTOTAL of Receipts This Page (optional) ► 260.15

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 30
(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 ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: A2008-523882

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Ross D Volk

Mailing Address One Health Plaza

City State Zip Code
East Hanover NJ 07936

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

Name of Employer Occupation
Novartis Services Incorporated Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: A2008-523907

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Barbara E Washington

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 ▼ 332.35

Date of Receipt
MM / DD / YYYY
03 / 20 / 2008

Transaction ID: A2008-523901

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ▶ **425.00**

TOTAL This Period (last page this line number only) ▶ **7432.98**

**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

A.	Full Name (Last, First, Middle Initial) Andrews for Congress	Transaction ID: B209911 Date of Disbursement
	Mailing Address P.O. Box 295	<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City Oaklyn State NJ Zip Code 08107	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Robert Andrews	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) People for English	Transaction ID: B209896 Date of Disbursement
	Mailing Address 104 Hume Avenue	<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City Alexandria State VA Zip Code 22301	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Philip S English	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) McHenry for Congress	Transaction ID: B209912 Date of Disbursement
	Mailing Address P.O. Box 1406	<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City Hickory State NC Zip Code 28603	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Patrick McHenry	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 10	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL 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)

<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) Tom Manion for Congress	Transaction ID: B210166 Date of Disbursement 03 / 07 / 2008
	Mailing Address 624 Hazelhurst Road	Amount of Each Disbursement this Period 1000.00
	City Merion Station State PA Zip Code 19066	
	Purpose of Disbursement Contribution Candidate Name Tom Manion	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) OrrinPAC	Transaction ID: B209897 Date of Disbursement 03 / 10 / 2008
	Mailing Address P.O. Box 1480	Amount of Each Disbursement this Period 2500.00
	City Washington State DC Zip Code 20013	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: US District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) More Conservatives PAC (McPAC)	Transaction ID: B210961 Date of Disbursement 03 / 20 / 2008
	Mailing Address 675 North Washington St. Suite 4	Amount of Each Disbursement this Period 2500.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: US District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

SUBTOTAL of Disbursements This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Cmte	Transaction ID: B210959
	Mailing Address 430 South Capitol St. SE	Date of Disbursement MM / DD / YYYY 03 / 20 / 2008
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: US District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) Friends of Roy Blunt	Transaction ID: B210960
	Mailing Address 209 Pennsylvania Ave. SE	Date of Disbursement MM / DD / YYYY 03 / 20 / 2008
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Roy Blunt	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Michael Burgess for Congress	Transaction ID: B210953
	Mailing Address 217 Third Street SE	Date of Disbursement MM / DD / YYYY 03 / 20 / 2008
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Michael C. Burgess	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 26	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	11000.00
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

A.

Full Name (Last, First, Middle Initial)
Chambliss for Senate

Transaction ID: B210954
Date of Disbursement

Mailing Address 101 Constitution Ave. NW Suite 80

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	8

City Washington State DC Zip Code 20001

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Saxby Chambliss

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: GA District:

B.

Full Name (Last, First, Middle Initial)
Collins for Senator

Transaction ID: B210952
Date of Disbursement

Mailing Address 201 Massachusetts Ave. NW Suite C

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	8

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Susan M Collins

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: ME District:

C.

Full Name (Last, First, Middle Initial)
Friends of Gregory Meeks

Transaction ID: B210958
Date of Disbursement

Mailing Address 1010 Vermont Ave. NW Suite 814

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	8

City Washington State DC Zip Code 20005

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Gregory W Meeks

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NY District: 06

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

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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

<p>A. Full Name (Last, First, Middle Initial) Sue Myrick for Congress</p> <p>Mailing Address 2501 Wisconsin Ave. #304</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Contribution Candidate Name Sue Myrick</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B210956 Date of Disbursement 03 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Payne for Congress</p> <p>Mailing Address 1924 Oakwood Street</p> <p>City Temple Hills State MD Zip Code 20748</p> <p>Purpose of Disbursement Contribution Candidate Name Donald M Payne</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 10</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B210955 Date of Disbursement 03 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Gordon Smith</p> <p>Mailing Address 900 19th St. NW 8th Floor</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Contribution Candidate Name Gordon H Smith</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B210951 Date of Disbursement 03 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<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) Team Sununu	Transaction ID: B210950 Date of Disbursement 03 / 20 / 2008
	Mailing Address 900 19th St. NW 8th Floor	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20006	
	Purpose of Disbursement Contribution Candidate Name John Sununu	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Nathan Deal for Congress	Transaction ID: B211067 Date of Disbursement 03 / 21 / 2008
	Mailing Address P.O. Box 368	Amount of Each Disbursement this Period 2500.00
	City Falls Church State VA Zip Code 22040	
	Purpose of Disbursement Contribution Candidate Name Nathan Deal	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 09	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Roberts for Senate	Transaction ID: B210957 Date of Disbursement 03 / 21 / 2008
	Mailing Address P.O. Box 433	Amount of Each Disbursement this Period 1000.00
	City Great Bend State KS Zip Code 67530	
	Purpose of Disbursement Contribution Candidate Name Pat Roberts	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	37500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Friends of Tom Corbett <hr/> Mailing Address P.O. Box 1056 <hr/> City Glenside State PA Zip Code 19038 <hr/> Purpose of Disbursement P-2008 State Att. General PA <hr/> Candidate Name Tom Corbett <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B209904 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) Stern for Assembly <hr/> Mailing Address P.O. Box 312 <hr/> City Hollidaysburg State PA Zip Code 16648 <hr/> Purpose of Disbursement P-2008 State House 80 PA <hr/> Candidate Name Jerry A Stern <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B210962 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

1000.00

Image# 28990856567

Form/Schedule: **SA11AI**

Transaction ID:

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