

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Novartis Corporation Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		198729.54
(b) Cash on Hand at Beginning of Reporting Period.....	94478.88	
(c) Total Receipts (from Line 19)	26915.11	157425.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	121393.99	356154.79
7. Total Disbursements (from Line 31).....	15577.81	250338.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	105816.18	105816.18
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Novartis Corporation Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13154.65	39115.12
(ii) Unitemized	13760.46	116310.13
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	26915.11	155425.25
(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)	26915.11	155425.25
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	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	26915.11	157425.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	26915.11	157425.25

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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	77.81	438.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	77.81	438.61
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12000.00	240500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	3500.00	9400.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15577.81	250338.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15577.81	250338.61

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	26915.11	155425.25
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26915.11	155425.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	77.81	438.61
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	77.81	438.61

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

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

FOR LINE NUMBER: PAGE 6 OF 44
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

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 AD IT Service Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362047

Amount of Each Receipt this Period
 46.16

Full Name (Last, First, Middle Initial)
B. Neilda A Baron

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 Ex Dir Medical Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362452

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
C. 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 Exec Director Health Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 599.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362469

Amount of Each Receipt this Period
 92.30

SUBTOTAL of Receipts This Page (optional)..... ▶ 238.46

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 44
	<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. Troy L Borill
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Sr. Oncology Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **246.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014
Transaction ID : A2014-1362164

Amount of Each Receipt this Period
38.04

B. Michael D Brooks
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation ASM II/Sr Oncol Area Sales Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014
Transaction ID : A2014-1361873

Amount of Each Receipt this Period
40.00

C. Thomas R Brunner
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation IT Expert 1

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.04**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014
Transaction ID : A2014-1362232

Amount of Each Receipt this Period
46.16

SUBTOTAL of Receipts This Page (optional)..... **124.20**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 44
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Patricia A Cannon		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID : A2014-1362521
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="70.00"/>
Name of Employer	Occupation	
Novartis Pharmaceuticals	Director State Health Policy	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="490.00"/>	

Full Name (Last, First, Middle Initial) B. Daniel P Casserly		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID : A2014-1362745
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="276.92"/>
Name of Employer	Occupation	
Novartis Services Incorporated	Head of Fed Government Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1799.98"/>	

Full Name (Last, First, Middle Initial) C. Cynthia C Cetani		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID : A2014-1362236
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="46.16"/>
Name of Employer	Occupation	
Novartis Pharmaceuticals	VP Chf Compliance Offcr/U.S. Hd	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.04"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="393.08"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 44
<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. Atindra N Chaturvedi
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Head DataCenter Svcs America
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.04**

Date of Receipt **06 / 30 / 2014**
Transaction ID : A2014-1361980
 Amount of Each Receipt this Period **46.16**

B. Barbara Christensen-Boner
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation AD State & External Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **357.87**

Date of Receipt **06 / 30 / 2014**
Transaction ID : A2014-1361758
 Amount of Each Receipt this Period **55.52**

C. Sean T Clark
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Alcon Laboratories Inc. Occupation Head US Marketing-SRG
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 30 / 2014**
Transaction ID : A2014-1362571
 Amount of Each Receipt this Period **60.00**

SUBTOTAL of Receipts This Page (optional)..... **161.68**
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 10 OF 44
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Cathryn M Clary		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : A2014-1362522
Mailing Address One Health Plaza		Amount of Each Receipt this Period 200.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation Head US Med & Chief Scien Offc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) B. Noelle L Cloud Dugan		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : A2014-1362738
Mailing Address One Health Plaza		Amount of Each Receipt this Period 100.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Consumer Health Inc.	Occupation VP Global Policy OTC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Julie A Collins		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : A2014-1362572
Mailing Address One Health Plaza		Amount of Each Receipt this Period 92.30
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Alcon Laboratories Inc.	Occupation Director Digital Mktg	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 599.95	

SUBTOTAL of Receipts This Page (optional).....▶	392.30
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 44
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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 Exe Dir Account Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1361932

Amount of Each Receipt this Period
 46.16

Full Name (Last, First, Middle Initial)
B. Seth Coombs

Mailing Address 350 Massachusetts Avenue

City State Zip Code
 Cambridge MA 02139

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

Name of Employer Occupation
 Novartis Vaccines & Diagnostics Sr Dir Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 599.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362823

Amount of Each Receipt this Period
 92.30

Full Name (Last, First, Middle Initial)
C. Eric C Couture

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 VP Global DRA TA Head

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362426

Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 178.46

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 44
	<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. Sally R Daniels
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A2014-1362453

Amount of Each Receipt this Period
50.00

B. William E Darnall
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza Ste 725

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Vaccines & Diagnostics Occupation Director Immunization Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A2014-1362788

Amount of Each Receipt this Period
100.00

C. Terry H Deason
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation National Acct Scientific Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A2014-1362513

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **190.00**

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 13 OF 44
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Candace B Dibblee		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2014 Transaction ID : A2014-1362748
Mailing Address One Health Plaza		Amount of Each Receipt this Period 60.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Novartis Services Incorporated	Occupation Asc Dir Fegl Leg Affairs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) B. Carter L Dutch		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2014 Transaction ID : A2014-1362514
Mailing Address One Health Plaza		Amount of Each Receipt this Period 100.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Novartis Pharmaceuticals	Occupation ED Regional Account Management
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) C. David R Epstein		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2014 Transaction ID : A2014-1362747
Mailing Address One Health Plaza		Amount of Each Receipt this Period 100.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Novartis Services Incorporated	Occupation Head Pharma AG
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	260.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 14 OF 44
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Thomas S Fellers

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 Head Med Acct Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362090

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. Debra E Freire

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 Head Advocacy & Ext Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362045

Amount of Each Receipt this Period
 46.16

Full Name (Last, First, Middle Initial)
C. 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 AD State & External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 792.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1361946

Amount of Each Receipt this Period
 122.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 268.66

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

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

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

FOR LINE NUMBER: PAGE 15 OF 44
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Steven J Gabor

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 Vaccines & Diagnostics Director Public Access

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 227.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362834

Amount of Each Receipt this Period
 35.00

Full Name (Last, First, Middle Initial)
B. Lisa M Goldman

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 Exec Dir Regulatory Compliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362494

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
C. Erwin A Gomez Valladares

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 Latin America Service Procurement - Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 599.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362740

Amount of Each Receipt this Period
 92.30

SUBTOTAL of Receipts This Page (optional)..... ▶ 227.30

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

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

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

FOR LINE NUMBER: PAGE 16 OF 44
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Nancy J Grande

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 Head Proc Improv & Compliance IMS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362369

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. Kris Grzegorzewski

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 Onco Ex Dir Clinical Res Phys

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362473

Amount of Each Receipt this Period
 80.00

Full Name (Last, First, Middle Initial)
C. Joseph M Guidi

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 Product Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362450

Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00

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 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Joseph Guido			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : A2014-1362252
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Novartis Pharmaceuticals	Ex Dir CSO COE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="295.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. David E Gulick			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : A2014-1361777
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="46.16"/>
Name of Employer	Occupation		
Novartis Pharmaceuticals	Director Startegic Market Acc		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.04"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Kurt Habel			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : A2014-1361978
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="46.16"/>
Name of Employer	Occupation		
Novartis Pharmaceuticals	Asc Dir Incentive Modeling/Des		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.04"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="112.32"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 44
	<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. Philip D Hall
Full Name (Last, First, Middle Initial)

Mailing Address 6201 South Freeway

City Fort Worth State TX Zip Code 76134-2001

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

Name of Employer Alcon Laboratories Inc. Occupation Sr Division Manager - SRG

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.04**

Date of Receipt **06 / 30 / 2014**

Transaction ID : A2014-1362589

Amount of Each Receipt this Period **46.16**

B. Sarah E Haller
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Services Incorporated Occupation VP Intl Public Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.04**

Date of Receipt **06 / 30 / 2014**

Transaction ID : A2014-1362746

Amount of Each Receipt this Period **46.16**

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Medical Unit Head Critcl Care

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.04**

Date of Receipt **06 / 30 / 2014**

Transaction ID : A2014-1362415

Amount of Each Receipt this Period **46.16**

SUBTOTAL of Receipts This Page (optional)..... ▶ **138.48**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 44
	<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. John A Hohneker
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation IHC Dev. Franchise Head

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A2014-1362001

Amount of Each Receipt this Period
50.00

B. Melody Hughson
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Ex Director Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A2014-1362499

Amount of Each Receipt this Period
100.00

C. Edgar L Jarvis
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Sr Area Business Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **209.95**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A2014-1361817

Amount of Each Receipt this Period
32.30

SUBTOTAL of Receipts This Page (optional)..... ▶ **182.30**

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

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

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

FOR LINE NUMBER: PAGE 20 OF 44
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. Mr. Joseph Jimenez

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 Pharmaceuticals CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 26 / 2014
Transaction ID : A2014-1540568

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Tawfik Kamal

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 IACH-Capability Bldg Academy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2014
Transaction ID : A2014-1362019

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Sarah G Kan

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 Asc Dir State & Ext Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
689.91

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2014
Transaction ID : A2014-1362535

Amount of Each Receipt this Period
106.14

SUBTOTAL of Receipts This Page (optional)..... ▶ 5156.14

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 OF 44
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Thomas N Kendris

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 VP General Counsel NPC Country

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 599.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1361717

Amount of Each Receipt this Period
 92.30

Full Name (Last, First, Middle Initial)
B. Shannon T Klinger

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
 Sandoz Inc. Global Head Lgl & Gen Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 692.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362774

Amount of Each Receipt this Period
 115.38

Full Name (Last, First, Middle Initial)
C. 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 ED State & External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1499.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1361846

Amount of Each Receipt this Period
 230.76

SUBTOTAL of Receipts This Page (optional)..... ▶ 438.44

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 22 OF 44
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Paul M Kotch		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2014 Transaction ID : A2014-1362647
Mailing Address One Health Plaza		Amount of Each Receipt this Period 40.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Alcon Laboratories Inc.	Occupation Dir Regional Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.54	

Full Name (Last, First, Middle Initial) B. Robert W Kowalski		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2014 Transaction ID : A2014-1362474
Mailing Address One Health Plaza		Amount of Each Receipt this Period 92.30
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation SVP Glb Hd DRA & Hd Glb Dev US	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 599.95	

Full Name (Last, First, Middle Initial) C. Richard E Lemire		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2014 Transaction ID : A2014-1361698
Mailing Address One Health Plaza		Amount of Each Receipt this Period 86.52
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation Engineering-Facilities - Direc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 562.38	

SUBTOTAL of Receipts This Page (optional).....▶	218.82
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 23 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Richard Lloyd			Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : A2014-1362735
Mailing Address One Health Plaza			Amount of Each Receipt this Period 92.30
City East Hanover	State NJ	Zip Code 07936	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 599.95	
Name of Employer Novartis Consumer Health Inc.		Occupation Region Head North America	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Jeffrey W Lockwood			Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : A2014-1362860
Mailing Address One Health Plaza			Amount of Each Receipt this Period 46.16
City East Hanover	State NJ	Zip Code 07936	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 300.04	
Name of Employer NIBRI		Occupation Head NIBR Communications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Brenda Luckritz			Date of Receipt MM / DD / YYYY 06 / 11 / 2014 Transaction ID : A2014-1540567
Mailing Address One Health Plaza			Amount of Each Receipt this Period 1000.00
City East Hanover	State NJ	Zip Code 07936	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1275.00	
Name of Employer Novartis Services Incorporated		Occupation Ex Dir Fed Leg Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	1138.46
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 24 OF 44
<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. Brenda Luckritz
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Services Incorporated Occupation Ex Dir Fed Leg Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1325.00**

Date of Receipt **06 / 30 / 2014**
Transaction ID : A2014-1362743

Amount of Each Receipt this Period **50.00**

B. William R Matthews
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Sr Oncol Area Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **276.02**

Date of Receipt **06 / 30 / 2014**
Transaction ID : A2014-1361938

Amount of Each Receipt this Period **42.68**

C. Catharine M McBride
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation AD State & External Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **599.95**

Date of Receipt **06 / 30 / 2014**
Transaction ID : A2014-1361865

Amount of Each Receipt this Period **92.30**

SUBTOTAL of Receipts This Page (optional)..... **184.98**

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 25 OF 44
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)
A. Christopher B McDonald

Mailing Address 475 Green Oaks Parkway

City State Zip Code
Holly Springs NC 27540

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

Name of Employer Occupation
Novartis Vaccines & Diagnostics Site Head

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
06 / 30 / 2014
Transaction ID : A2014-1362837

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Edward D McGough

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
Alcon Laboratories Inc. SVP Global Mfg & Tech Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1499.94

Date of Receipt
06 / 30 / 2014
Transaction ID : A2014-1362613

Amount of Each Receipt this Period
230.76

Full Name (Last, First, Middle Initial)
C. 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 Exec Dir Supply Chain Mngmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
599.95

Date of Receipt
06 / 30 / 2014
Transaction ID : A2014-1361886

Amount of Each Receipt this Period
92.30

SUBTOTAL of Receipts This Page (optional)..... ▶ 423.06

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 26 OF 44
<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. Brian J McNamara
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Consumer Health Inc. Occupation Division Head OTC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **599.95**

Date of Receipt **06 / 30 / 2014**

Transaction ID : A2014-1362734

Amount of Each Receipt this Period **92.30**

B. Gary J Menichini
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Alcon Laboratories Inc. Occupation Div Head US Pharma Mkt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **06 / 30 / 2014**

Transaction ID : A2014-1362570

Amount of Each Receipt this Period **50.00**

C. Susan J Millard
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Alcon Laboratories Inc. Occupation Head HR Alcon R&D

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **06 / 30 / 2014**

Transaction ID : A2014-1362577

Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional)..... **192.30**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 44
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Regina M Mitchell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2014 Transaction ID : A2014-1362857
Mailing Address One Health Plaza		Amount of Each Receipt this Period 60.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Vaccines & Diagnostics	Occupation Senior Vaccines Solution Speci	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) B. Stacey L Moore		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2014 Transaction ID : A2014-1361849
Mailing Address One Health Plaza		Amount of Each Receipt this Period 35.90
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation Resp Integrated Account Spec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.04	

Full Name (Last, First, Middle Initial) C. Vasant K Narasimhan		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2014 Transaction ID : A2014-1362840
Mailing Address 350 Massachusetts Avenue		Amount of Each Receipt this Period 46.15
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Vaccines & Diagnostics	Occupation IADE-BU HD Bioph & OI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 507.65	

SUBTOTAL of Receipts This Page (optional).....▶	142.05
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 28 OF 44
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Hugh M O'Dowd		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2014 Transaction ID : A2014-1361851
Mailing Address One Health Plaza		Amount of Each Receipt this Period 46.16
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation Global Head GPS & SD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.04	

Full Name (Last, First, Middle Initial) B. Shawn O'Neil		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2014 Transaction ID : A2014-1362753
Mailing Address 608 Fifth Avenue		Amount of Each Receipt this Period 92.30
City New York	State NY	Zip Code 10020
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Services Incorporated	Occupation Ex Dir Legislative Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 599.95	

Full Name (Last, First, Middle Initial) C. Sharon N Olmstead		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2014 Transaction ID : A2014-1362503
Mailing Address One Health Plaza		Amount of Each Receipt this Period 46.16
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation VP GL.Hd Reg Policy & Intelli	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.04	

SUBTOTAL of Receipts This Page (optional).....▶	184.62
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 29 OF 44
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Craig S Osten		Date of Receipt 06 / 30 / 2014 Transaction ID : A2014-1362778
Mailing Address One Health Plaza		Amount of Each Receipt this Period 46.16
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Vaccines & Diagnostics	Occupation CFO - NVD US	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.04	

Full Name (Last, First, Middle Initial) B. Serafina Oxner		Date of Receipt 06 / 30 / 2014 Transaction ID : A2014-1362063
Mailing Address One Health Plaza		Amount of Each Receipt this Period 46.16
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation Ex Dir Healthcare Contract Adm	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.04	

Full Name (Last, First, Middle Initial) C. John M Pakulski		Date of Receipt 06 / 30 / 2014 Transaction ID : A2014-1362772
Mailing Address One Health Plaza		Amount of Each Receipt this Period 92.30
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Sandoz Inc.	Occupation Exec Director Regulatory Affai	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 599.95	

SUBTOTAL of Receipts This Page (optional).....▶	184.62
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 30 OF 44
<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. Bin Peng
Full Name (Last, First, Middle Initial)
Mailing Address One Health Plaza
City East Hanover State NJ Zip Code 07936
FEC ID number of contributing federal political committee. **C**
Name of Employer Novartis Pharmaceuticals Occupation Onco Ex Dir Clinical Res Phys
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **06 / 30 / 2014**
Transaction ID : A2014-1362475
Amount of Each Receipt this Period **50.00**

B. Candice C Phipps
Full Name (Last, First, Middle Initial)
Mailing Address One Health Plaza
City East Hanover State NJ Zip Code 07936
FEC ID number of contributing federal political committee. **C**
Name of Employer Sandoz Inc. Occupation Director Government Affairs
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1300.00**

Date of Receipt **06 / 30 / 2014**
Transaction ID : A2014-1362777
Amount of Each Receipt this Period **200.00**

C. Elizabeth Power
Full Name (Last, First, Middle Initial)
Mailing Address 350 Massachusetts Avenue
City Cambridge State MA Zip Code 02139
FEC ID number of contributing federal political committee. **C**
Name of Employer Novartis Services Incorporated Occupation Dir. Global Media Relations
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 30 / 2014**
Transaction ID : A2014-1362754
Amount of Each Receipt this Period **60.00**

SUBTOTAL of Receipts This Page (optional)..... **310.00**
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 31 OF 44
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Marc B Reuss

Mailing Address 350 Massachusetts Avenue

City State Zip Code
 Cambridge MA 02139

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

Name of Employer Occupation
 Novartis Vaccines & Diagnostics Head Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362842

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. Kevin T Rigby

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 VP PA NPC Country PA Head

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1499.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362024

Amount of Each Receipt this Period
 230.76

Full Name (Last, First, Middle Initial)
C. Renee C Rodgers

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 Head Digital Strategy And Svc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362505

Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 340.76

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 32 OF 44
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Novartis Corporation Political Action Committee

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Sr. Regional Key Account Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **388.37**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A2014-1361752

Amount of Each Receipt this Period
60.42

Full Name (Last, First, Middle Initial)
B. Joseph M Ryan

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Therapeutic Area Head

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A2014-1362519

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Adwoa A Sanderson

Mailing 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 Ex Dir Advocacy & Access

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A2014-1362541

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **210.42**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 44
	<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. Christi L Shaw
Full Name (Last, First, Middle Initial)

Mailing Address 44 Guinea Hollow Rd

City Lebanon State NJ Zip Code 08833

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

Name of Employer Novartis Pharmaceuticals Occupation US Country President & President NPC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.04**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362487

Amount of Each Receipt this Period
46.16

B. Joseph M Simon
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation MS Exec Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **239.98**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1361877

Amount of Each Receipt this Period
36.92

C. Stephen H Speares
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Alcon Laboratories Inc. Occupation Head Glb Franch Mgmt-Catarac

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.07**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : A2014-1362636

Amount of Each Receipt this Period
30.78

SUBTOTAL of Receipts This Page (optional)..... ▶ **113.86**

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 34 OF 44
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. Robert A Spurr

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 Pharmaceuticals VP Oncology Managed Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
06 / 30 / 2014
Transaction ID : A2014-1362524

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. 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 Director State&External Affrs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.06

Date of Receipt
06 / 30 / 2014
Transaction ID : A2014-1361798

Amount of Each Receipt this Period
69.24

Full Name (Last, First, Middle Initial)
c. Mary R Strickland

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
Sandoz Inc. Exec Dir Government Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.04

Date of Receipt
06 / 30 / 2014
Transaction ID : A2014-1362771

Amount of Each Receipt this Period
46.16

SUBTOTAL of Receipts This Page (optional)..... ▶ 315.40

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 35 OF 44
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. John Suchorsky		Date of Receipt 06 / 30 / 2014 Transaction ID : A2014-1362020
Mailing Address One Health Plaza		Amount of Each Receipt this Period 46.16
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation Demand Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.04	

Full Name (Last, First, Middle Initial) B. Thomas A Suter		Date of Receipt 06 / 30 / 2014 Transaction ID : A2014-1362451
Mailing Address One Health Plaza		Amount of Each Receipt this Period 46.16
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation Dir State & External Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.04	

Full Name (Last, First, Middle Initial) C. Richard Tessier		Date of Receipt 06 / 30 / 2014 Transaction ID : A2014-1362077
Mailing Address One Health Plaza		Amount of Each Receipt this Period 46.16
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation Director Regional Project Eng	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.04	

SUBTOTAL of Receipts This Page (optional).....▶	138.48
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 36 OF 44
(check only one)

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

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

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation SENIOR KEY ACCOUNT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.24**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A2014-1362112

Amount of Each Receipt this Period
63.48

Full Name (Last, First, Middle Initial)
B. Thomas A Urban

Mailing 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 ExecRespiratorySalesSpecialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **203.82**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A2014-1361713

Amount of Each Receipt this Period
31.64

Full Name (Last, First, Middle Initial)
C. Andrew J Volante

Mailing 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 World Head Health Outc Val Access ONC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **599.95**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A2014-1361927

Amount of Each Receipt this Period
92.30

SUBTOTAL of Receipts This Page (optional)..... ▶ **187.42**

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

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

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

FOR LINE NUMBER: PAGE 37 OF 44
(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. Matthew M von Wellsheim
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Alcon Laboratories Inc. Occupation VP IT & CIO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **300.04**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014
Transaction ID : A2014-1362616
 Amount of Each Receipt this Period
46.16

B. Robert K Warner
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Alcon Laboratories Inc. Occupation Head US & Canada
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **300.04**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014
Transaction ID : A2014-1362623
 Amount of Each Receipt this Period
46.16

C. Jane E Welborn
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Sr Oncology Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **319.15**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014
Transaction ID : A2014-1361815
 Amount of Each Receipt this Period
49.10

SUBTOTAL of Receipts This Page (optional)..... ▶ **141.42**
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 38 OF 44
(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)
Stephen A Woolford

Mailing 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 Ex Dir Business Plang & Analy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.04**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : A2014-1362060

Amount of Each Receipt this Period
46.16

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	46.16
TOTAL This Period (last page this line number only).....▶	13154.65

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Capital One Bank

Mailing Address 701 Pennsylvania Ave. NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Bank Service Charge

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

/ /

Transaction ID : B507280

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Volunteers for Shimkus

Mailing Address 499 S. Capitol St. SW Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

John M Shimkus

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 15

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : B497893

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Debbie Dingell for Congress

Mailing Address PO Box 746

City Dearborn State MI Zip Code 48121

Purpose of Disbursement
Contribution

011

Candidate Name

Debbie Dingell

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MI District: 12

Date of Disbursement

MM / DD / YYYY
06 / 20 / 2014

Transaction ID : B498820

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Donald Norcross for Congress

Mailing Address 499 South Capitol St. SW Suite 42

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Donald W Norcross

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NJ District: 01

Date of Disbursement

MM / DD / YYYY
06 / 20 / 2014

Transaction ID : B498817

Amount of Each Disbursement this Period

1000.00

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

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pascrell for Congress

Mailing Address 38 Ivy Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

William J Pascrell Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NJ District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	4

Transaction ID : B498818

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Steve Israel for Congress Committee

Mailing Address PO Box 1400

City Melville State NY Zip Code 11747

Purpose of Disbursement
Contribution

011

Candidate Name

Steve Israel

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	4

Transaction ID : B498816

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Alexander for Senate 2014 Inc.

Mailing Address 228 S. Washington St. Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution

011

Candidate Name

Lamar Alexander

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	4

Transaction ID : B497892

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0

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

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

7	5	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Enzi for US Senate

Mailing Address 406 Virginia Ave.

City Alexandria State VA Zip Code 22302

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Michael B Enzi

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2014

Transaction ID : B498819

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

2000.00

12000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Batchelder for Representative Committee

Mailing Address 20 S. Front Street 2nd Floor

City Columbus State OH Zip Code 43215

Purpose of Disbursement
G-2014 State House 81 OH

011

Candidate Name

William G Batchelder

Category/
Type

Office Sought: House
 Senate
 President
State: OH District: 81

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 20 / 2014

Transaction ID : B498814

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Faber

Mailing Address 7706 Street Route 703

City Celina State OH Zip Code 45822

Purpose of Disbursement
P-2016 State Senate 12 OH

011

Candidate Name

Keith Faber

Category/
Type

Office Sought: House
 Senate
 President
State: OH District: 12

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 20 / 2014

Transaction ID : B498815

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. People for Matt Baker Committee

Mailing Address P.O. Box 602

City Wellsboro State PA Zip Code 16901

Purpose of Disbursement
G-2014 State House 68 PA

011

Candidate Name

Matt Baker

Category/
Type

Office Sought: House
 Senate
 President
State: PA District: 68

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2014

Transaction ID : B499505

Amount of Each Disbursement this Period

500.00

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

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Joe Scarnati

Mailing Address P.O. Box 177

City State Zip Code
Brockway PA 15824

Purpose of Disbursement
G-2014 State Senate 25 PA

011

Category/
Type

Candidate Name

Joseph B Scarnati III

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 25

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 26 / 2014

Transaction ID : B499506

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

1000.00

3500.00