

**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. Friends of Schumer

Mailing Address 220 I Street NE Suite 250

City Washington State DC Zip Code 20002

Purpose of Disbursement Contribution

011

Candidate Name

Charles E Schumer

Category/Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: NY District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : B511580

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Wyden for Senate

Mailing Address 3612 Newark St. NW

City Washington State DC Zip Code 20016

Purpose of Disbursement Contribution

011

Candidate Name

Ron Wyden

Category/Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: OR District:

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2014

Transaction ID : B532570

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Pat Toomey

Mailing Address 499 S. Capitol St. SW Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

011

Candidate Name

Pat Toomey

Category/Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: PA District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : B531576

Amount of Each Disbursement this Period

2000.00

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

4000.00

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