07/19/2010 15:24

(Rev. 12/2004)

Image# 10990976638

### **FEC** FORM 3X

COMMITTEE (in full)

Check if different than previously

reported. (ACC)

C00033969

**TYPE OF REPORT** 

(a) Quarterly Reports:

April 15

July 15

(TER)

Covering Period

Signature of Treasurer

Office

Use

Only

October 15

(Choose One)

1. NAME OF

### REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only **USE FEC MAILING LABEL** Example: If typing, type OR TYPE OR PRINT over the lines Novartis Corporation Political Action Committee 701 Pennsylvania Ave. NW Suite 725 ADDRESS (number and street) DC 20004 2608 Washington FEC IDENTIFICATION NUMBER **STATE** CITY A ZIPCODE A IS THIS NEW **AMENDED** Χ REPORT OR (N) (A) (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report in the Election on State of 06 0 1 2010 06 30 2010 through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Dan P. Casserly Type or Print Name of Treasurer Electronically Filed by Dan P. Casserly 07 19 2010 Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. **FEC FORM 3X** 

FE6AN026

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2 / 45

Write or Type Committee Name Novartis Corporation Political Action Committee

FEC Form 3X (Rev. 02/2003)

D <sup>®</sup>D 06 0 1 2010 0.6 3 0 2010 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 124624.48 January 1 (b) Cash on Hand at 66858.55 Begining of Reporting Period ..... 29774.20 182153.27 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 96632.75 306777.75 6(a) and 6(c) for Column B) ..... 238822.50 28677.50 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 67955.25 67955.25 (subtract Line 7 from Line 6(d)) ..... Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

X 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

FE6AN026

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 45

Write or Type Committee Name

Novartis Corporation Political Action Committee

Report Covering the Period:

From: 0 6

D D 0 1

<sup>Y</sup> 2010

то.

м м 0 6 <sup>D</sup> 3 0

Y Y Y Y 2 0 1 0

|             | I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|-------------|--|-------------------------------|-----------------------------------|
|             | Contributions (other than loans) From:  a) Individuals/Persons Other |                               |                                   |
|             | Than Political Committees (i) Itemized (use Schedule A)              | 7926.86                       | 31942.65                          |
|             | (ii) Unitemized  | 21847.34                      | 150210.62                         |
|             | (iii) TOTAL (add Lines 11(a)(i) and (ii)                             | 29774.20                      | 182153.27                         |
| (1          | b) Political Party Committees  | 0.00                          | 0.00                              |
| `           | c) Other Political Committees (such as PACs)                         | 0.00                          | 0.00                              |
|             | 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)            | 29774.20                      | 182153.27                         |
|             | Fransfers From Affiliated/Other Party Committees                     | 0.00                          | 0.00                              |
| 3. <i>A</i> | All Loans Received   | 0.00                          | 0.00                              |
|             | oan Repayments Received  Offsets To Operating Expenditures           | 0.00                          | 0.00                              |
| (           | Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)             | 0.00                          | 0.00                              |
| to          | o Federal candidates and Other Political Committees                  | 0.00                          | 0.00                              |
|             | Other Federal Receipts Dividends, Interest, etc.)                    | 0.00                          | 0.00                              |
|             | ransfers from Non-Federal and Levin Funds                            |                               |                                   |
| (;          | a) Non-Federal Account (from Schedule H3)                            | 0.00                          | 0.00                              |
| (1          | b) Levin Funds (from Schedule H5)                                    | 0.00                          | 0.00                              |
| (0          | c) Total Transfer (add 18(a) and 18(b)).                             | 0.00                          | 0.00                              |
|             | Otal Receipts (add Lines 11(d),<br>2, 13, 14, 15, 16, 17, and 18(c)) | 29774.20                      | 182153.27                         |
|             | otal Federal Receipts subtract Line 18(c) from Line 19)              | 29774.20                      | 182153.27                         |

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 45

|     | II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|-----|--|-------------------------------|-----------------------------------|
| 21. | Operating Expenditures:  (a) Shared Federal/Non-Federal                          |                               |                                   |
|     | Activity (from Schedule H4)  | 0.00                          | 0.00                              |
|     | (i) Federal Share  | 0.00                          | 0.00                              |
|     | (ii) Non-Federal Share   | 0.00                          | 0.00                              |
|     | (b) Other Federal Operating  | 1007.50                       | 0700 50                           |
|     | Expenditures   | 1927.50                       | 2722.50                           |
|     | (c) Total Operating Expenditures   | 1007.50                       | 0700 50                           |
| _   | (add 21(a)(i), (a)(ii) and (b))  | 1927.50                       | 2722.50                           |
| 2.  | Transfers to Affiliated/Other Party  | 0.00                          | 0.00                              |
| 3.  | Committees   | 0.00                          | 0.00                              |
| ٠.  | Federal Candidates/Committeesand Other Political Committees                      | 25750.00                      | 228250.00                         |
| 1   | and Other Political Committees   | 23730.00                      | 220230.00                         |
| +.  | (use Schedule E)   | 0.00                          | 0.00                              |
| 5.  | Coordinated Expenditures Made by Party   |                               |                                   |
|     | Committees (2 U.S.C. 441a(d)) (use Schedule F)                                   | 0.00                          | 0.00                              |
|     | (acc conodic i )   |                               |                                   |
| 6.  | Loan Repayments Made   | 0.00                          | 0.00                              |
|     | F  |                               |                                   |
|     | Loans Made   | 0.00                          | 0.00                              |
| 8.  | 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   | 0.00                          | 0.00                              |
|     | (such as PACs)   | 0.00                          | 0.00                              |
|     | (d) Total Contribution Refunds   | 0.00                          | 0.00                              |
|     | (add Lines 28(a), (b), and (c))  | 0.00                          | 0.00                              |
| 9.  | Other Disbursements  | 1000.00                       | 7850.00                           |
| ^   | Enderal Election Activity (2.11.5.0.421(20))                                     |                               |                                   |
| 0.  | Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity |                               |                                   |
|     | (from Schedule H6)   |                               |                                   |
|     | (i) Federal Share  | 0.00                          | 0.00                              |
|     | (1) 1 6061 & 511 & 6   |                               |                                   |
|     | (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<br>Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00                          | 0.00                              |
| 1.  | Total Disbursements (add Lines 21(c), 22,  |                               |                                   |
|     | 23, 24, 25, 26, 27, 28(d), 29 and 30(c))   | 28677.50                      | 238822.50                         |
|     |  |                               |                                   |
|     |  |                               |                                   |
| 2.  | Total Federal Disbursements  |                               |                                   |
| 2.  | Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)          | 28677.50                      | 238822.50                         |

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 45

|     | III. Net Contributions/Operating<br>Expenditures                        | COLUMN A Total This Period | COLUMN B<br>Calendar Year-to-Date |
|-----|---|----------------------------|-----------------------------------|
| 33. | Total Contributions (other than loans) from Line 11(d), page 3)         | 29774.20                   | 182153.27                         |
| 84. | Total Contribution Refunds<br>(from Line 28(d))                         | 0.00                       | 0.00                              |
| 35. | Net Contributions (other than loans) (subtract Line 34 from Line 33)    | 29774.20                   | 182153.27                         |
| 36. | Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 1927.50                    | 2722.50                           |
| 37. | Offsets to Operating Expenditures (from Line 15, page 3)                | 0.00                       | 0.00                              |
| 38. | Net Operating Expenditures (subtract Line 37 from Line 36)              | 1927.50                    | 2722.50                           |

FE6AN026

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page  | FOR LINE NUMBER: PAGE 6 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 17  |
|---|--|---|
| Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  Novartis Corporation Political Activ              | nd Statements may not be sold or used by any perso<br>g the name and address of any political committee to<br>on Committee | n for the purpose of soliciting contributions solicit contributions from such committee.  |
| Full Name (Last, First, Middle Initial) Michael Banko Mailing Address One Health Plaza  City East Hanover  FEC ID number of contributing federal political committee. | State Zip Code<br>NJ 07936   | Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 3 0 2 0 1 0  Transaction ID: A2010-1587782  Amount of Each Receipt this Period  50.00 |
| Name of Employer Novartis Pharmaceuticals  Receipt For:  Primary General Other (specify) ▼  | Occupation Executive  Aggregate Year-to-Date   300.00  | ]   |
| Full Name (Last, First, Middle Initial) Tracy L Baroni Allmon Mailing Address One Health Plaza  | <b>'</b>   | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| City  East Hanover  FEC ID number of contributing federal political committee.  | State Zip Code NJ 07936  | Transaction ID: A2010-1588935  Amount of Each Receipt this Period  100.00   |
| Name of Employer Novartis Pharmaceuticals  Receipt For:  Primary General  Other (specify) ▼   | Occupation Executive  Aggregate Year-to-Date ▼  500.00   |   |
| Full Name (Last, First, Middle Initial) Elisa Bauer Mailing Address One Health Plaza  |  | Date of Receipt   |
| City East Hanover   | State Zip Code<br>NJ 07936   | Transaction ID: A2010-1587098  Amount of Each Receipt this Period   |
| FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals   | Occupation   | 50.00   |
| Receipt For:  Primary General  Other (specify) ▼  | Executive  Aggregate Year-to-Date ▼  300.00  |   |
| SUBTOTAL of Receipts This Page (option  | al)  | 200.00  |

| ITI  | EMIZED RECEIPTS   | totomonto mo                              | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 7 / 45 (check only one)    X   11a                                    |
|------|---|---|---|---|
| or f | y information copied from such Reports and S<br>or commercial purposes, other than using the<br>NAME OF COMMITTEE (In Full)<br>Novartis Corporation Political Action C  | name and add                              | y not be sold or used by any personders of any political committee to   | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| A.   | Full Name (Last, First, Middle Initial) Michael Beck Mailing Address One Health Plaza City East Hanover   | State<br>NJ                               | Zip Code<br>07936   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
|      | FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For:  Primary General Other (specify)  | Occupation Executive Aggregate            |   | 75.00   |
| В.   | Full Name (Last, First, Middle Initial) Timothy C Bedman Mailing Address One Health Plaza  City East Hanover  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For: Primary General Other (specify) | State NJ C Occupation Executive Aggregate |   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
| C.   | Full Name (Last, First, Middle Initial) Rainer Boehm  Mailing Address One Health Plaza  City East Hanover  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For: Primary General Other (specify)    | State NJ C Occupation Executive Aggregate |   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
|      | JBTOTAL of Receipts This Page (optional)  DTAL This Period (last page this line number)   |   |   | 272.31  |

|          | SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS   |                              | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 8 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 17              |
|----------|--|------------------------------|---|---|
|          | Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | Statements mage name and add | y not be sold or used by any persidress of any political committee to   | on for the purpose of soliciting contributions o solicit contributions from such committee. |
|          | Novartis Corporation Political Action (  | Committee                    |   |   |
| Α.       | Full Name (Last, First, Middle Initial) Peri K Bonner  |                              |   | Date of Receipt   |
|          | Mailing Address One Health Plaza   | 7:n Code                     | 06 30 2010  |   |
|          | City<br><u>East Hanover</u>  | State<br>NJ                  | Zip Code<br>07936   | Transaction ID: A2010-1587423   |
|          | FEC ID number of contributing federal political committee.   | C                            | 07930   | Amount of Each Receipt this Period  57.60   |
|          | Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive       |   |   |
|          | Receipt For:  Primary General  Other (specify) ▼   | Aggregate                    | e Year-to-Date ▼ 343.08   |   |
| ь.<br>В. | Full Name (Last, First, Middle Initial) Mark D Bordley   |                              |   | Date of Receipt   |
|          | Mailing Address One Health Plaza   |                              |   | 06 30 4 2010  |
|          | City   | State                        | Zip Code  | Transaction ID: A2010-1588677   |
|          | East Hanover  FEC ID number of contributing federal political committee.   | NJ<br>C                      | 07936   | Amount of Each Receipt this Period  50.00   |
|          | Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive       |   |   |
|          | Receipt For:  ☐ Primary ☐ General  Other (specify) ▼   | Aggregate                    | e Year-to-Date ▼ 300.00   |   |
| с.<br>С. | Full Name (Last, First, Middle Initial)<br>Troy L Borill   |                              |   | Date of Receipt   |
|          | Mailing Address One Health Plaza   |                              |   | 06 30 2010  |
|          | City   | State                        | Zip Code  | Transaction ID: A2010-1588056   |
|          | East Hanover  FEC ID number of contributing federal political committee.   | NJ<br>C                      | 07936   | Amount of Each Receipt this Period  36.93   |
|          | Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive       |   |   |
|          | Receipt For:  Primary General  Other (specify) ▼   |                              | e Year-to-Date ▼ 221.58   |   |
|          | SUBTOTAL of Receipts This Page (optional) .  |                              |   | 144.53  |
|          | TOTAL This Period (last page this line number  |                              |   |   |

|         | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  |                                | Use separate schedule(s) for each category of the Detailed Summary Page    | FOR LINE NUMBER: PAGE 9 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 17              |
|---------|--|--------------------------------|--|---|
|         | Any information copied from such Reports and sor for commercial purposes, other than using the | Statements ma<br>e name and ad | y not be sold or used by any person<br>dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
|         | NAME OF COMMITTEE (In Full)  Novartis Corporation Political Action (                           | Committee                      |  |   |
| Α.      | Full Name (Last, First, Middle Initial) Jacques Bramhall IV, IV                                |                                |  | Date of Receipt   |
|         | Mailing Address One Health Plaza   | 06 30 2010                     |  |   |
|         | City<br>East Hanover   | State<br>NJ                    | Zip Code<br>07936  | Transaction ID: A2010-1587263  Amount of Each Receipt this Period                           |
|         | FEC ID number of contributing federal political committee.                                     | С                              |  | 50.00   |
|         | Name of Employer<br>Novartis Pharmaceuticals   | Occupation<br>Executive        |  |   |
|         | Receipt For:  Primary General  Other (specify) ▼   | Aggregate                      | e Year-to-Date ▼ 300.00  |   |
| -<br>В. | Full Name (Last, First, Middle Initial) Leonard J Brandt                                       |                                |  | Date of Receipt   |
|         | Mailing Address One Health Plaza   | 06 30 2010                     |  |   |
|         | City   | State                          | Zip Code   | Transaction ID: A2010-1587761   |
|         | East Hanover FEC ID number of contributing federal political committee.                        | NJ<br>C                        | 07936  | Amount of Each Receipt this Period  50.00   |
|         | Name of Employer<br>Novartis Pharmaceuticals   | Occupation<br>Executiv         |  |   |
|         | Receipt For:  Primary General  Other (specify) ▼   | Aggregate                      | e Year-to-Date ▼ 300.00  |   |
| -<br>С. | Full Name (Last, First, Middle Initial)<br>Ellen M Browne                                      |                                |  | Date of Receipt   |
|         | Mailing Address One Health Plaza   |                                |  | 0 6 3 0 Y Y Y Y Y Y   |
|         | City   | State                          | Zip Code   | Transaction ID: A2010-1587845   |
|         | East Hanover  FEC ID number of contributing federal political committee.                       | NJ<br>C                        | 07936  | Amount of Each Receipt this Period  50.00   |
|         | Name of Employer<br>Novartis Pharmaceuticals   | Occupation<br>Executive        |  |   |
|         | Receipt For:  Primary General  Other (specify) ▼   | Aggregate                      | e Year-to-Date ▼ 300.00  |   |
|         | SUBTOTAL of Receipts This Page (optional) .  | 1                              |  | 150.00  |
|         | TOTAL This Period (last page this line number  |                                | <u> </u>   |   |

| I               | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS   | Statomento mo                 | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 10 / 45 (check only one)    X   11a                                   |
|-----------------|---|-------------------------------|---|---|
| 7               | Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Novartis Corporation Political Action ( | e name and ad                 | y not be sold or used by any persidress of any political committee to   | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| ∠<br><b>A</b> . | Full Name (Last, First, Middle Initial) Thomas R Brunner  Mailing Address One Health Plaza  |                               |   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |
|                 | City  | State                         | Zip Code  | Transaction ID: A2010-1588257   |
|                 | East Hanover FEC ID number of contributing federal political committee.   | NJ<br>C                       | 07936   | Amount of Each Receipt this Period  60.00   |
|                 | Name of Employer Novartis Pharmaceuticals  Receipt For:  Primary General Other (specify) ▼  | Occupation Executiv Aggregate |   |   |
| -<br>В.         | Full Name (Last, First, Middle Initial) Jonca C Bull Mailing Address One Health Plaza   |                               |   | Date of Receipt  0 6 3 0 2 0 1 0  |
|                 | City  | State                         | Zip Code  | Transaction ID: A2010-1588877   |
|                 | East Hanover  | NJ                            | 07936   | Amount of Each Receipt this Period  |
|                 | FEC ID number of contributing federal political committee.  | C                             |   | 50.00   |
|                 | Name of Employer<br>Novartis Pharmaceuticals  | Occupation Executiv           | e   |   |
|                 | Receipt For:  Primary General  Other (specify) ♥  | Aggregate                     | e Year-to-Date ▼ 300.00   |   |
| с.<br>С.        | Full Name (Last, First, Middle Initial) Ronald M Califre  Mailing Address One Health Plaza  |                               |   | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                |
|                 | City  | State                         | Zip Code  | Transaction ID: A2010-1587756   |
|                 | East Hanover  | NJ                            | 07936   | Amount of Each Receipt this Period  |
|                 | FEC ID number of contributing federal political committee.  | C                             |   | 416.00  |
|                 | Name of Employer<br>Novartis Pharmaceuticals  | Occupation<br>Executiv        |   |   |
|                 | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                     | e Year-to-Date ▼<br>2496.00   |   |
|                 | SUBTOTAL of Receipts This Page (optional)   |                               | )   | 526.00  |
|                 | TOTAL This Period (last page this line number   | only)                         |   |   |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  | Κ)  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:   PAGE 11 / 45   (check only one)     X   11a     11b     11c   12   13   14     15   16 |
|--|---|---|---|
| Any information copied from such Reports ar or for commercial purposes, other than using | nd Statements may<br>the name and add             | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions osolicit contributions from such committee.                |
| NAME OF COMMITTEE (In Full) Novartis Corporation Political Action                        | on Committee                                      |   |   |
| Full Name (Last, First, Middle Initial) James P Carey                                    |   |   | Date of Receipt   |
| Mailing Address One Health Plaza   | M M / D D / Y Y Y Y O O O O O O O O O O O O O O O |   |   |
| City<br>East Hanover   | State<br>NJ                                       | Zip Code<br>07936   | Transaction ID: A2010-1587995  Amount of Each Receipt this Period   |
| FEC ID number of contributing federal political committee.                               | C   | 07000   | 91.00   |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive                            |   |   |
| Receipt For: Primary General Other (specify)   |   | e Year-to-Date ▼<br>539.00  |   |
| Full Name (Last, First, Middle Initial) Daniel P Casserly                                | <u> </u>  |   | Date of Receipt   |
| Mailing Address One Health Plaza   | 0 6 3 0 2 0 1 0                                   |   |   |
| City<br>East Hanover   | State<br>NJ                                       | Zip Code  | Transaction ID: A2010-1587469   |
| FEC ID number of contributing federal political committee.                               | C   | 07936   | Amount of Each Receipt this Period  200.00  |
| Name of Employer<br>Novartis Services Incorpo-   | Occupatio<br>Executive                            |   |   |
| rated Receipt For:  Primary General  Other (specify) ▼                                   | <del> </del>                                      | e Year-to-Date ▼<br>1200.00   |   |
| Full Name (Last, First, Middle Initial)<br>Steven J Catalano                             |   |   | Date of Receipt   |
| Mailing Address One Health Plaza   |   |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City<br>East Hanover   | State<br>NJ                                       | Zip Code<br>07936   | Transaction ID: A2010-1588025  Amount of Each Receipt this Period   |
| FEC ID number of contributing federal political committee.                               | C   |   | 86.67   |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive                            |   |   |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate   | Year-to-Date ▼ 520.02   |   |
| SUBTOTAL of Receipts This Page (optional   | al)   |   | 377.67  |

| Any information copied from such Reports and State or for commercial purposes, other than using the normal NAME OF COMMITTEE (In Full)  Novartis Corporation Political Action Comparison Political Action Politica | ame and address of any political committee to s | Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                            |
|--|---|---|
| Atindra N Chaturvedi  Mailing Address One Health Plaza  City   |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For:  Primary General   | Occupation Executive Aggregate Year-to-Date ▼   | Amount of Each Receipt this Period  50.00   |
| Other (specify) ▼  Full Name (Last, First, Middle Initial) Barbara Christensen-Boner  Mailing Address One Health Plaza   | 300.00  | Date of Receipt   |
| City  East Hanover  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  | State Zip Code NJ 07936  C Occupation Executive | 0 6 3 0 2 0 1 0  Transaction ID: A2010-1587132  Amount of Each Receipt this Period  55.20 |
| Receipt For:  Primary  General  Other (specify) ▼  | Aggregate Year-to-Date ▼  327.46                | -   |
| Full Name (Last, First, Middle Initial) Christina M Clinton Mailing Address One Health Plaza  City East Hanover FEC ID number of contributing  | State Zip Code<br>NJ 07936                      | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                            |
| federal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For:  | Occupation Executive                            | _   |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate Year-to-Date ▼ 300.00                 |   |
| SUBTOTAL of Receipts This Page (optional)  | <b>)</b>  | 155.20  |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS  | )                                    | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 13 / 45 (check only one)    X   |
|--|--------------------------------------|---|---|
| Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  Novartis Corporation Political Action | the name and add                     | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial)  Michael A Conley  Mailing Address One Health Plaza  |                                      |   | Date of Receipt  0 6 3 0 2 0 1 0  |
| City  East Hanover  FEC ID number of contributing federal political committee.   | State<br>NJ                          | Zip Code<br>07936   | Transaction ID: A2010-1587593  Amount of Each Receipt this Period  50.00                    |
| Name of Employer Novartis Pharmaceuticals  Receipt For:  Primary General  Other (specify) ▼  | Occupation<br>Executive<br>Aggregate |   | ]   |
| Full Name (Last, First, Middle Initial) Eric Dammeyer Mailing Address One Health Plaza City  | State                                | Zip Code  | Date of Receipt    M  |
| East Hanover  FEC ID number of contributing federal political committee.   | NJ                                   | 07936   | Amount of Each Receipt this Period  60.00   |
| Name of Employer Novartis Pharmaceuticals  Receipt For:  Primary General  Other (specify) ▼  | Occupatio<br>Executive<br>Aggregate  |   | ]   |
| Full Name (Last, First, Middle Initial) Robert J Derbes  Mailing Address One Health Plaza  |                                      |   | Date of Receipt   |
| City East Hanover FEC ID number of contributing federal political committee.   | State<br>NJ                          | Zip Code<br>07936   | Transaction ID: A2010-1587277  Amount of Each Receipt this Period  35.00                    |
| Name of Employer<br>Novartis Pharmaceuticals<br>Receipt For:   | Occupatio Executive                  |   |   |
| Primary General Other (specify) ▼  | , iggi ogalic                        | 210.00  |   |
| SUBTOTAL of Receipts This Page (optional   | )                                    |   | 145.00  |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS  | <b>.</b> )  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:   PAGE 14 / 45   (check only one)     X   11a     11b     11c   12   13   14     15   16 |
|--|---|---|---|
| Any information copied from such Reports an or for commercial purposes, other than using | d Statements may<br>the name and add              | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions osolicit contributions from such committee.                |
| NAME OF COMMITTEE (In Full)  Novartis Corporation Political Action                       | n Committee                                       |   |   |
| Full Name (Last, First, Middle Initial) Candace B Dibblee                                |   |   | Date of Receipt   |
| Mailing Address One Health Plaza   | M M / D D / Y Y Y Y O O O O O O O O O O O O O O O |   |   |
| City   | State   | Zip Code  | Transaction ID: A2010-1587870   |
| East Hanover  FEC ID number of contributing federal political committee.                 | NJ<br>C   | 07936   | Amount of Each Receipt this Period 250.00   |
| Name of Employer<br>Novartis Services Incorpo-<br>rated                                  | Occupatio<br>Executive                            |   |   |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate   | e Year-to-Date ▼<br>1250.00   | ]   |
| Full Name (Last, First, Middle Initial) David P Drake                                    |   |   | Date of Receipt   |
| Mailing Address One Health Plaza   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y       |   |   |
| City<br>East Hanover   | State<br>NJ                                       | Zip Code<br>07936   | Transaction ID: A2010-1587688   |
| FEC ID number of contributing federal political committee.                               | C   | 07930   | Amount of Each Receipt this Period  50.00   |
| Name of Employer<br>Novartis Services Incorpo-   | Occupatio<br>Executive                            |   |   |
| rated Receipt For:  Primary General  Other (specify) ▼                                   | <del>-   '</del>                                  | e Year-to-Date ▼ 500.00   |   |
| Full Name (Last, First, Middle Initial) James R Elkin                                    |   |   | Date of Receipt   |
| Mailing Address One Health Plaza   |   |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City   | State<br>NJ                                       | Zip Code  | Transaction ID: A2010-1587197   |
| East Hanover FEC ID number of contributing federal political committee.                  | C   | 07936   | Amount of Each Receipt this Period 416.00   |
| Name of Employer<br>Novartis Services Incorpo-<br>rated                                  | Occupatio<br>Executive                            | е   |   |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate   | e Year-to-Date ▼<br>2496.00   |   |
| SUBTOTAL of Receipts This Page (optional   | I   |   | 716.00  |

|         | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS   |                         | Use separate schedule(s) for each category of the Detailed Summary Page    | FOR LINE NUMBER: PAGE 15 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 17             |
|---------|---|-------------------------|--|---|
| (       | Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Novartis Corporation Political Action C | e name and ad           | y not be sold or used by any person<br>dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
|         | Full Name (Last, First, Middle Initial)   | Johnnitee               |  |   |
| ۱.      | David R Epstein  Mailing Address One Health Plaza   |                         |  | Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y                    |
|         | City East Hanover   | State<br>NJ             | Zip Code<br>07936  | Transaction ID: A2010-1587737  Amount of Each Receipt this Period                           |
|         | FEC ID number of contributing federal political committee.  | C                       |  | 100.00  |
|         | Name of Employer<br>Novartis Pharmaceuticals  | Occupation<br>Executive |  |   |
|         | Receipt For:  Primary General  Other (specify) ▼  | Aggregate               | e Year-to-Date ▼ 600.00  |   |
| -<br>3. | Full Name (Last, First, Middle Initial) Christopher Esposito  Mailing Address One Health Plaza  | 1                       |  | Date of Receipt   |
|         | City  | State                   | Zip Code   | 0 6 3 0 2 0 1 0<br>Transaction ID: A2010-1588031  |
|         | East Hanover  | NJ                      | 07936  | Amount of Each Receipt this Period  |
|         | FEC ID number of contributing federal political committee.  | C                       |  | 75.00   |
|         | Name of Employer<br>Novartis Pharmaceuticals  | Occupation Executive    |  |   |
|         | Receipt For:  Primary General  Other (specify) ▼  | Aggregate               | e Year-to-Date ▼ 450.00  |   |
| _<br>;. | Full Name (Last, First, Middle Initial)<br>H. P Frederick   | 1                       |  | Date of Receipt   |
|         | Mailing Address One Health Plaza  |                         |  | 06 30 7 2010  |
|         | City East Hanover   | State<br>NJ             | Zip Code<br>07936  | Transaction ID: A2010-1587573  Amount of Each Receipt this Period                           |
|         | FEC ID number of contributing federal political committee.  | C                       |  | 52.77   |
|         | Name of Employer<br>Novartis Pharmaceuticals  | Occupation<br>Executive |  |   |
|         | Receipt For:  Primary General  Other (specify) ▼  | Aggregate               | e Year-to-Date ▼ 314.84  |   |
|         | SUBTOTAL of Receipts This Page (optional)   | 1                       |  | 227.77  |
|         | TOTAL This Period (last page this line number   | only)                   |  |   |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  |  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 16 / 45 (check only one)    X   11a  |
|---|--|---|--|
| Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Novartis Corporation Political Action 6   | e name and add                             | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions   |
| Full Name (Last, First, Middle Initial) Debra E Freire Mailing Address One Health Plaza  City East Hanover  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For: Primary General         | State NJ  C  Occupatio Executive Aggregate |   | Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 3 0 2 0 1 0  Transaction ID: A2010-1587778  Amount of Each Receipt this Period  50.00  |
| Full Name (Last, First, Middle Initial) Neely T Frye Mailing Address One Health Plaza  City East Hanover  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For:                           | State NJ C Occupatio Executive Aggregate   | Zip Code<br>07936   | Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 3 0 2 0 1 0  Transaction ID: A2010-1587629  Amount of Each Receipt this Period  122.61 |
| Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Thomas E Giles  Mailing Address One Health Plaza  City East Hanover  FEC ID number of contributing federal political committee.  Name of Employer Novartis Services Incorpo- | State NJ C                                 | 728.50  Zip Code 07936  | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| Novartis Services Incorporated  Receipt For:  Primary General  Other (specify) ▼  SUBTOTAL of Receipts This Page (optional) .  TOTAL This Period (last page this line number)   |  | e Year-to-Date ▼<br>1050.00   | 347.61   |

| ITEN                                   | MIZED RECEIPTS   | ratomente ma                                | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 17 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions |
|--|--|---|---|--|
| or for o                               | commercial purposes, other than using the ME OF COMMITTEE (In Full) ovartis Corporation Political Action C   | name and add                                | dress of any political committee to                                     | o solicit contributions from such committee.   |
| A. Roll Ma                             | I Name (Last, First, Middle Initial) bert Gines illing Address One Health Plaza y sst Hanover  | State<br>NJ                                 | Zip Code<br>07936   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| fed<br>Na<br>No<br><u>rat</u>          | C ID number of contributing eral political committee.  me of Employer vartis Services Incorpoed ceipt For:  Primary General  Other (specify)   | Occupation Executive Aggregate              |   | 100.00   |
| B. Bris Ma City Ea FE fed Na           | I Name (Last, First, Middle Initial) an M Goff illing Address One Health Plaza  y ust Hanover  C ID number of contributing eral political committee.  me of Employer vartis Pharmaceuticals  ceipt For: Primary General Other (specify)      | State NJ  C  Occupation Executive Aggregate |   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| C. Da Ma  Ma  City Ea  FE  fed  Na  No | I Name (Last, First, Middle Initial)  vid E Gulick  illing Address One Health Plaza  v  st Hanover  C ID number of contributing eral political committee.  me of Employer vartis Pharmaceuticals  ceipt For: Primary General Other (specify) | State NJ  C  Occupation Executive Aggregate |   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
|  | FOTAL of Receipts This Page (optional)   |   |   | 200.00   |

|         | SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS   |                                  | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 18 / 45 (check only one)    X   |
|---------|---|----------------------------------|---|---|
| 7       | Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | Statements may<br>e name and add | not be sold or used by any persection of any political committee to     | on for the purpose of soliciting contributions o solicit contributions from such committee. |
|         | Novartis Corporation Political Action   | Committee                        |   |   |
| ۷.      | Full Name (Last, First, Middle Initial) Kurt Habel  |                                  |   | Date of Receipt   |
|         | Mailing Address One Health Plaza  |                                  |   | 06 30 2010  |
|         | City<br><u>East</u> Hanover   | State<br>NJ                      | Zip Code<br>07936   | Transaction ID: A2010-1587683  Amount of Each Receipt this Period                           |
|         | FEC ID number of contributing federal political committee.  | C                                |   | 50.00   |
|         | Name of Employer<br>Novartis Pharmaceuticals  | Occupation<br>Executive          |   |   |
|         | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                        | Year-to-Date ▼ 300.00   |   |
| _<br>3. | Full Name (Last, First, Middle Initial)<br>Sarah E Haller   |                                  |   | Date of Receipt   |
|         | Mailing Address One Health Plaza  | 0 6 3 0 Y Y Y Y Y Y Y Y          |   |   |
|         | City  | State                            | Zip Code  | Transaction ID: A2010-1587590   |
|         | East Hanover FEC ID number of contributing federal political committee.   | C                                | 07936   | Amount of Each Receipt this Period  50.00   |
|         | Name of Employer<br>Novartis Services Incorpo-<br>rated   | Occupation<br>Executive          |   |   |
|         | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                        | Year-to-Date ▼ 300.00   |   |
| -<br>:  | Full Name (Last, First, Middle Initial)<br>Daryl Harvey   |                                  |   | Date of Receipt   |
|         | Mailing Address One Health Plaza  |                                  |   | 0 6 3 0 / Y Y Y Y Y Y Y   |
|         | City  | State                            | Zip Code  | Transaction ID: A2010-1587265   |
|         | East Hanover  FEC ID number of contributing federal political committee.  | C                                | 07936   | Amount of Each Receipt this Period 40.00  |
|         | Name of Employer<br>Novartis Pharmaceuticals  | Occupation<br>Executive          |   |   |
|         | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                        | Year-to-Date ▼ 240.00   |   |
|         | SUBTOTAL of Receipts This Page (optional) .   |                                  |   | 140.00  |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  | Κ)                                    | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 19/45   (check only one)   X   11a                                    |  |  |  |
|--|---------------------------------------|---|---|--|--|--|
| Any information copied from such Reports ar or for commercial purposes, other than using | nd Statements may<br>the name and add | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions o solicit contributions from such committee. |  |  |  |
| NAME OF COMMITTEE (In Full) Novartis Corporation Political Action                        | n Committee                           |   |   |  |  |  |
| Full Name (Last, First, Middle Initial) Joseph P Hazelton                                |                                       |   | Date of Receipt   |  |  |  |
| Mailing Address One Health Plaza   | · ·                                   |   |   |  |  |  |
| City<br>East Hanover   | State<br>NJ                           | Zip Code<br>07936   | Transaction ID: A2010-1587666  Amount of Each Receipt this Period                           |  |  |  |
| FEC ID number of contributing federal political committee.                               | C                                     | 07000   | 34.39   |  |  |  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive                |   |   |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate                             | e Year-to-Date ▼<br>204.34  |   |  |  |  |
| Full Name (Last, First, Middle Initial) Debbie L Henderson                               |                                       |   | Date of Receipt   |  |  |  |
| Mailing Address One Health Plaza   | 0 6 3 0 2 0 1 0                       |   |   |  |  |  |
| City   | State Zip Code ast Hanover NJ 07936   |   |   |  |  |  |
| FEC ID number of contributing federal political committee.                               | C                                     | 07930   | Amount of Each Receipt this Period 75.00  |  |  |  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive                |   |   |  |  |  |
| Receipt For: Primary General Other (specify)   | <del>- 1 '</del>                      | e Year-to-Date ▼ 450.00   |   |  |  |  |
| Full Name (Last, First, Middle Initial)<br>Cynthia Hogan                                 |                                       |   | Date of Receipt   |  |  |  |
| Mailing Address One Health Plaza   |                                       |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |  |  |  |
| City<br>East Hanover   | State<br>NJ                           | Zip Code<br>07936   | Transaction ID: A2010-1587010  Amount of Each Receipt this Period                           |  |  |  |
| FEC ID number of contributing federal political committee.                               | C                                     |   | 50.00   |  |  |  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive                |   |   |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼   |                                       | Year-to-Date ▼ 300.00   |   |  |  |  |
|  |                                       |   | 159.39  |  |  |  |

| SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS   | <b>A</b> )                                  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:   PAGE 20 / 45   (check only one)  |  |  |  |
|--|---|---|---|--|--|--|
| Any information copied from such Reports a or for commercial purposes, other than usin | and Statements may                          | y not be sold or used by any persodress of any political committee to         | on for the purpose of soliciting contributions o solicit contributions from such committee. |  |  |  |
| NAME OF COMMITTEE (In Full) Novartis Corporation Political Acti                        | on Committee                                |   |   |  |  |  |
| Full Name (Last, First, Middle Initial) Woodson M Hopkins                              |   |   | Date of Receipt   |  |  |  |
| Mailing Address One Health Plaza   |   |   |   |  |  |  |
| City   | State                                       | Zip Code  | 0 6 3 0 2 0 1 0  Transaction ID: A2010-1588101  |  |  |  |
| East Hanover  FEC ID number of contributing federal political committee.               | NJ<br>C                                     | 07936   | Amount of Each Receipt this Period  50.00   |  |  |  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive                      |   |   |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                                       | Aggregate                                   | e Year-to-Date ▼ 300.00   |   |  |  |  |
| Full Name (Last, First, Middle Initial) Karen A Jacobs                                 |   |   | Date of Receipt   |  |  |  |
| Mailing Address One Health Plaza   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |   |   |  |  |  |
| City<br>East Hanover   | State<br>NJ                                 | Zip Code<br>07936   | Transaction ID: A2010-1587749   |  |  |  |
| FEC ID number of contributing federal political committee.                             | C   | 07930   | Amount of Each Receipt this Period 40.00  |  |  |  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive                      |   |   |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                                       |   | e Year-to-Date ▼ 240.00   |   |  |  |  |
| Full Name (Last, First, Middle Initial) Edgar L Jarvis                                 |   |   | Date of Receipt   |  |  |  |
| Mailing Address One Health Plaza   |   |   | 0 6 3 0 2 0 1 0   |  |  |  |
| City<br>East Hanover   | State<br>NJ                                 | Zip Code  | Transaction ID: A2010-1587274   |  |  |  |
| FEC ID number of contributing federal political committee.                             | C   | 07936   | Amount of Each Receipt this Period  35.00   |  |  |  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive                      |   |   |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                                       | Aggregate                                   | e Year-to-Date ▼ 210.00   |   |  |  |  |
| SUBTOTAL of Receipts This Page (option   | nal)  |   | 125.00  |  |  |  |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 21 / 45 (check only one)  X 11a 11b 11c 12  13 14 15 16 |
|--|---|---|
| Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  Novartis Corporation Political Action | nd Statements may not be sold or used by any pers<br>the name and address of any political committee to<br>on Committee |   |
| Full Name (Last, First, Middle Initial) Sheldon Jones Mailing Address One Health Plaza   |   | Date of Receipt  0 6 3 0 2 0 1 0  |
| City East Hanover FEC ID number of contributing  | State Zip Code<br>NJ 07936  | Transaction ID: A2010-1587177  Amount of Each Receipt this Period             |
| Federal political committee.  Name of Employer Novartis Finance Corporation Receipt For:  Primary General Other (specify)                                  | Occupation Executive  Aggregate Year-to-Date   816.84   | 137.43  |
| Full Name (Last, First, Middle Initial) Tawfik Kamal Mailing Address One Health Plaza  |   | Date of Receipt  0 6 3 0 2 0 1 0  |
| City   | State Zip Code  | Transaction ID: A2010-1587743   |
| East Hanover FEC ID number of contributing   | NJ 07936  | Amount of Each Receipt this Period  |
| federal political committee.   | C   | 40.00   |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupation Executive  |   |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate Year-to-Date ▼ 240.00   |   |
| Full Name (Last, First, Middle Initial)<br>Karen L Key   |   | Date of Receipt   |
| Mailing Address One Health Plaza   |   | 0 6 3 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                 |
| City<br>East Hanover   | State Zip Code<br>NJ 07936  | Transaction ID: A2010-1588623   |
| FEC ID number of contributing federal political committee.   | NJ 07936  | Amount of Each Receipt this Period  50.00                                     |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupation Executive  |   |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate Year-to-Date ▼ 300.00   |   |
|  |   | 227.43  |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 22 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 |
|---|---|--|
| Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  Novartis Corporation Political Actio | d Statements may not be sold or used by any per<br>the name and address of any political committee<br>n Committee |  |
| Full Name (Last, First, Middle Initial) Dennis S Keyes Mailing Address One Health Plaza   |   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y               |
| City <u>East Hanover</u> FEC ID number of contributing federal political committee.   | State Zip Code NJ 07936   | Transaction ID: A2010-1587438  Amount of Each Receipt this Period  39.14     |
| Name of Employer Novartis Pharmaceuticals  Receipt For:  Primary  Other (specify) ▼   | Occupation Executive  Aggregate Year-to-Date ▼  |  |
| Full Name (Last, First, Middle Initial) Richard E Knapp Mailing Address One Health Plaza  |   | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                 |
| City East Hanover FEC ID number of contributing federal political committee.  | State Zip Code NJ 07936   | Transaction ID: A2010-1587378  Amount of Each Receipt this Period  200.00    |
| Name of Employer Novartis Pharmaceuticals  Receipt For:  Primary General  Other (specify) ▼   | Occupation Executive  Aggregate Year-to-Date ▼  1200.00   |  |
| Full Name (Last, First, Middle Initial) Mildred O Kowalski  Mailing Address One Health Plaza  |   | Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y     |
| City East Hanover FEC ID number of contributing federal political committee.  | State Zip Code NJ 07936   | Transaction ID: A2010-1588010  Amount of Each Receipt this Period  50.00     |
| Name of Employer<br>Novartis Pharmaceuticals  | Occupation Executive  |  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate Year-to-Date ▼ 300.00   |  |
| SUBTOTAL of Receipts This Page (optional  | l)  | 289.14   |

| SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 23 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 17           |
|--|---|---|
| Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  Novartis Corporation Political Acti  | and Statements may not be sold or used by any persong the name and address of any political committee to on Committee | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Keith A LaDue Mailing Address One Health Plaza  City East Hanover  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For: Primary General   | State Zip Code NJ 07936  C  Occupation Executive Aggregate Year-to-Date   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                            |
| Full Name (Last, First, Middle Initial) Richard E Lemire Mailing Address One Health Plaza  City East Hanover  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharma Suffern  Receipt For: Primary General | State Zip Code NJ 07936  C  Occupation Executive  Aggregate Year-to-Date  | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                            |
| Full Name (Last, First, Middle Initial) Jeffrey W Lockwood Mailing Address One Health Plaza  City East Hanover FEC ID number of contributing federal political committee.  Name of Employer NIBRI  Receipt For: Primary General Other (specify)  | State Zip Code NJ 07936  C  Occupation Executive  Aggregate Year-to-Date  300.00                                      | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                            |
| SUBTOTAL of Receipts This Page (option   | al)   | 187.90  |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS  | <b>.</b> )  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 24 / 45   (check only one)   X   11a                                  |
|--|---|---|---|
| Any information copied from such Reports an or for commercial purposes, other than using | d Statements may                                    | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full)  Novartis Corporation Political Action                       | n Committee   |   |   |
| Full Name (Last, First, Middle Initial) Brenda Luckritz                                  |   |   | Date of Receipt   |
| Mailing Address One Health Plaza   | M M / D D / Y Y Y Y Y O D O O O O O O O O O O O O O |   |   |
| City<br>East Hanover   | State<br>NJ   | Zip Code<br>07936   | Transaction ID: A2010-1587194  Amount of Each Receipt this Period                           |
| FEC ID number of contributing federal political committee.                               | C   | 07930   | 416.00  |
| Name of Employer<br>Novartis Services Incorpo-<br>rated                                  | Occupatio<br>Executive                              |   |   |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate   | Year-to-Date ▼<br>2496.00   |   |
| Full Name (Last, First, Middle Initial) Mary L Manning                                   |   |   | Date of Receipt   |
| Mailing Address One Health Plaza   | 0 6 3 0 2 0 1 0                                     |   |   |
| City<br>East Hanover   | State<br>NJ   | Zip Code<br>07936   | Transaction ID: A2010-1588076   |
| FEC ID number of contributing federal political committee.                               | C   | 07930   | Amount of Each Receipt this Period 83.33  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive                              |   |   |
| Receipt For:  Primary General  Other (specify) ▼   | <del>-   '</del>                                    | e Year-to-Date ▼ 499.98   |   |
| Full Name (Last, First, Middle Initial) William R Matthews                               |   |   | Date of Receipt   |
| Mailing Address One Health Plaza   |   |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City<br>East Hanover   | State<br>NJ   | Zip Code<br>07936   | Transaction ID: A2010-1587610   |
| FEC ID number of contributing federal political committee.                               | C   | 0/930   | Amount of Each Receipt this Period 41.68  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive                              |   |   |
| Receipt For:  Primary General  Other (specify) ▼   |   | e Year-to-Date ▼<br>249.26  |   |
| SUBTOTAL of Receipts This Page (optiona  | I   |   | 541.01  |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  | <b>(</b> )  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:   PAGE 25 / 45   (check only one)  |  |
|--|---|---|---|--|
| Any information copied from such Reports ar or for commercial purposes, other than using | nd Statements may the name and add                  | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions solicit contributions from such committee. |  |
| NAME OF COMMITTEE (In Full)  Novartis Corporation Political Actio                        | n Committee   |   |   |  |
| Full Name (Last, First, Middle Initial) Edward G Mauceri                                 |   |   | Date of Receipt   |  |
| Mailing Address One Health Plaza   | M M / D D / Y Y Y Y Y O D O O O O O O O O O O O O O |   |   |  |
| City   | State<br>NJ   | Zip Code  | Transaction ID: A2010-1587802   |  |
| East Hanover  FEC ID number of contributing federal political committee.                 | C   | 07936   | Amount of Each Receipt this Period  50.00   |  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupation  |   |   |  |
| Receipt For:  Primary General  Other (specify)   |   | e Year-to-Date ▼ 300.00   |   |  |
| Full Name (Last, First, Middle Initial) Matthew C Mc Namara                              |   |   | Date of Receipt   |  |
| Mailing Address One Health Plaza   | M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O   |   |   |  |
| City East Hanover  | State Zip Code Hanover NJ 07936                     |   |   |  |
| FEC ID number of contributing federal political committee.                               | C   | 07930   | Amount of Each Receipt this Period 40.00  |  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupation<br>Executive                             |   |   |  |
| Receipt For: Primary General Other (specify)   | <del></del>   | e Year-to-Date ▼ 240.00   |   |  |
| Full Name (Last, First, Middle Initial) Catharine M McGeehan                             |   |   | Date of Receipt   |  |
| Mailing Address One Health Plaza   |   |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |  |
| City<br>East Hanover   | State<br>NJ   | Zip Code<br>07936   | Transaction ID: A2010-1587413  Amount of Each Receipt this Period                         |  |
| FEC ID number of contributing federal political committee.                               | C   | 07330   | 75.00   |  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupation<br>Executive                             |   |   |  |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate   | Year-to-Date ▼ 450.00   |   |  |
|  |   |   | 165.00  |  |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  | <b>X</b> )   | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 26 / 45 (check only one)    X   |
|--|--|---|---|
| Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  Novartis Corporation Political Action | the name and add   | y not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) William D McLaury Mailing Address One Health Plaza   |  |   | Date of Receipt   |
| City East Hanover  | State<br>NJ  | Zip Code<br>07936   | Transaction ID: A2010-1587470  Amount of Each Receipt this Period                           |
| FEC ID number of contributing federal political committee.   | C  |   | 100.00  |
| Name of Employer<br>Novartis Pharmaceuticals  Receipt For:   | Occupatio<br>Executive                                       |   |   |
| Primary General Other (specify) ▼  | Aggregate  | 600.00  |   |
| Full Name (Last, First, Middle Initial) Brian J McNamara  Mailing Address One Health Plaza   | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |   |   |
| City   | Transaction ID: A2010-1586904                                |   |   |
| East Hanover   | NJ   | 07936   | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.   | C  |   | 100.00  |
| Name of Employer<br>Novartis Consumer Health<br>Inc.<br>Receipt For:   |  | President OTC   |   |
| Primary General Other (specify) ▼  | Aggregate  | e Year-to-Date ▼ 600.00   |   |
| Full Name (Last, First, Middle Initial) Wayne P Merkelson  |  |   | Date of Receipt   |
| Mailing Address One Health Plaza   |  |   | 06 30 7 2010  |
| City   | State  | Zip Code  | Transaction ID: A2010-1587789   |
| East Hanover  FEC ID number of contributing federal political committee.   | C  | 07936   | Amount of Each Receipt this Period  75.00   |
| Name of Employer<br>Novartis Finance Corporat-<br>ion  | Occupatio<br>Executive                                       | e   |   |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate  | Year-to-Date ▼ 450.00   | ]   |
| SUBTOTAL of Receipts This Page (options  | al)  |   | 275.00  |

|                                     | EDULE A (FEC Form 3X)  IIZED RECEIPTS  |   | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 27 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 17  |
|-------------------------------------|--|---|---|--|
| or for o                            | formation copied from such Reports and S<br>commercial purposes, other than using the<br>ME OF COMMITTEE (In Full)<br>vartis Corporation Political Action C  | name and add                              | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions o solicit contributions from such committee.  |
| A. Full Star Mai City Ea FEC fedo   | Name (Last, First, Middle Initial) cey L Moore ling Address One Health Plaza  st Hanover C ID number of contributing eral political committee. me of Employer vartis Pharmaceuticals ceipt For: Primary General  | State NJ C Occupation Executive           |   | Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 3 0 2 0 1 0  Transaction ID: A2010-1587383  Amount of Each Receipt this Period  34.64  |
| B. Gle Mai City Ea FEC fede Nar Nor | Other (specify)  Name (Last, First, Middle Initial) Inn H Morton ling Address One Health Plaza  St Hanover C ID number of contributing eral political committee.  The of Employer vartis Pharmaceuticals  Steipt For: Primary General Other (specify)  Other (specify) | State NJ C Occupation Executive Aggregate | Zip Code<br>07936   | Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 3 0 2 0 1 0  Transaction ID: A2010-1587659  Amount of Each Receipt this Period  154.57 |
| C. Mar Mai City Ea FEG fedd         | Name (Last, First, Middle Initial) rion T Morton  ling Address One Health Plaza  / st Hanover  C ID number of contributing eral political committee.  me of Employer vartis Pharmaceuticals  ceipt For: Primary General Other (specify)                                | State NJ C Occupation Executive Aggregate |   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
|                                     | OTAL of Receipts This Page (optional)  L This Period (last page this line number   |   | <u> </u>  | 289.21   |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  | Use separate schedule(s) for each category of the Detailed Summary Page                        | FOR LINE NUMBER: PAGE 28 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 17                   |  |  |
|---|--|---|--|--|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | Statements may not be sold or used by any pe<br>le name and address of any political committee | rson for the purpose of soliciting contributions<br>to solicit contributions from such committee. |  |  |
| Novartis Corporation Political Action   | Committee  |   |  |  |
| Full Name (Last, First, Middle Initial)  John Chong Neal  |  | Date of Receipt   |  |  |
| Mailing Address 350 Massachusetts A<br>350 MA # 212F  | ve   | 06 04 2010  |  |  |
| City  | State Zip Code   | Transaction ID: A2010-1586921   |  |  |
| <u>Cambridge</u>  | MA 02139   | Amount of Each Receipt this Period  |  |  |
| FEC ID number of contributing federal political committee.  | C  | 50.00   |  |  |
| Name of Employer<br>Novartis Vaccines & Diagn-<br>ostics  | Occupation Executive   |   |  |  |
| Receipt For:  | Aggregate Year-to-Date ▼   |   |  |  |
| Primary General Other (specify) ▼   | 300.00   |   |  |  |
| Full Name (Last, First, Middle Initial) Hugh M O'Dowd   |  | Date of Receipt   |  |  |
| Mailing Address One Health Plaza  | Mailing Address One Health Plaza   |   |  |  |
| City  | State Zip Code   | Transaction ID: A2010-1587386   |  |  |
| East Hanover  | NJ 07936   | Amount of Each Receipt this Period  |  |  |
| FEC ID number of contributing federal political committee.  | C  | 50.00   |  |  |
| Name of Employer<br>Novartis Pharmaceuticals  | Occupation Executive   |   |  |  |
| Receipt For:  | Aggregate Year-to-Date ▼   |   |  |  |
| Primary General Other (specify) ▼   | 300.00   |   |  |  |
| Full Name (Last, First, Middle Initial) Serafina Oxner  |  | Date of Receipt   |  |  |
| Mailing Address One Health Plaza  |  | 0 6 3 0 Y Y Y Y Y Y   |  |  |
| City  | State Zip Code   | Transaction ID: A2010-1587819   |  |  |
| East Hanover  | NJ 07936   | Amount of Each Receipt this Period  |  |  |
| FEC ID number of contributing federal political committee.  | С  | 50.00   |  |  |
| Name of Employer<br>Novartis Pharmaceuticals  | Occupation Executive   |   |  |  |
| Receipt For: Primary General  | Aggregate Year-to-Date ▼   |   |  |  |
| Other (specify) ▼   | 300.00   |   |  |  |
| SUBTOTAL of Receipts This Page (optional)   |  | 150.00  |  |  |
| TOTAL This Period (last page this line number   |  |   |  |  |

|            | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  | 2                                    | Use separate schedule(s) for each category of the Detailed Summary Page  | FOR LINE NUMBER: PAGE 29 / 45 (check only one)    X   |
|------------|--|--------------------------------------|--|---|
| 7          | Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Novartis Corporation Political Action ( | e name and ad                        | y not be sold or used by any pers<br>dress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| <b>A</b> . | Full Name (Last, First, Middle Initial) Paul G Pochtar Mailing Address One Health Plaza  City  | State                                | Zip Code   | Date of Receipt    M   M     D   D     Y   Y   Y   Y   Y   Y   Y                            |
|            | East Hanover  FEC ID number of contributing federal political committee.   | NJ<br>C                              | 07936  | Amount of Each Receipt this Period  |
|            | Name of Employer Novartis Pharmaceuticals  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼   | Occupation<br>Executive<br>Aggregate |  |   |
| Б.         | Full Name (Last, First, Middle Initial) Diana Potter  Mailing Address One Health Plaza   |                                      |  | Date of Receipt  0 6 3 0 2 0 1 0  |
|            | City<br>East Hanover   | State<br>NJ                          | Zip Code<br>07936  | Transaction ID: A2010-1587697  Amount of Each Receipt this Period                           |
|            | FEC ID number of contributing federal political committee.   | C                                    |  | 50.00   |
|            | Name of Employer Novartis Pharmaceuticals  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼   | Occupation<br>Executive<br>Aggregate |  |   |
| С.         | Full Name (Last, First, Middle Initial)  Marilyn Priestley  Mailing Address One Health Plaza   |                                      |  | Date of Receipt  0 6 3 0 2 0 1 0  |
|            | City   | State                                | Zip Code   | Transaction ID: A2010-1587700   |
|            | East Hanover  FEC ID number of contributing federal political committee.   | NJ<br>C                              | 07936  | Amount of Each Receipt this Period 40.00  |
|            | Name of Employer<br>Novartis Pharmaceuticals   | Occupation<br>Executive              |  |   |
|            | Receipt For:  Primary General  Other (specify) ▼   | + +                                  | e Year-to-Date ▼ 240.00  |   |
|            | SUBTOTAL of Receipts This Page (optional)  |                                      |  | 255.00  |
| Ī          | TOTAL This Period (last page this line number  | only)                                |  |   |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS   | <b>X</b> )                               | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:   PAGE 30 / 45   (check only one)  |
|---|--|---|---|
| Any information copied from such Reports a or for commercial purposes, other than using | and Statements may<br>g the name and add | not be sold or used by any persodress of any political committee to           | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full)  Novartis Corporation Political Action                      | <u> </u>                                 |   |   |
| Full Name (Last, First, Middle Initial) Brian C Prout                                   |  |   | Date of Receipt   |
| Mailing Address One Health Plaza  |  |   | 0 6 3 0 2 0 1 0   |
| City  | State                                    | Zip Code  | Transaction ID: A2010-1588679   |
| East Hanover  FEC ID number of contributing federal political committee.                | NJ<br>C                                  | 07936   | Amount of Each Receipt this Period  50.00   |
| Name of Employer<br>Novartis Pharmaceuticals  | Occupation                               |   |   |
| Receipt For:  Primary General  Other (specify) ▼  |  | Year-to-Date ▼ 300.00   |   |
| Full Name (Last, First, Middle Initial) Rebecca W Reid                                  |  |   | Date of Receipt   |
| Mailing Address One Health Plaza  |  |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City  | State                                    | Zip Code  | Transaction ID: A2010-1587889   |
| East Hanover  FEC ID number of contributing federal political committee.                | C  | 07936   | Amount of Each Receipt this Period 47.90  |
| Name of Employer<br>Novartis Pharmaceuticals  | Occupation<br>Executive                  |   |   |
| Receipt For:  Primary General  Other (specify) ▼  |  | Year-to-Date ▼<br>285.52  |   |
| Full Name (Last, First, Middle Initial) Marc Britton Reuss                              |  |   | Date of Receipt   |
| Mailing Address 350 Massachusetts 350 MA # 274  | s Ave                                    |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City<br>Cambridge   | State<br>MA                              | Zip Code<br>02139   | Transaction ID: A2010-1586920   |
| FEC ID number of contributing federal political committee.                              | C  | 02139   | Amount of Each Receipt this Period  50.00   |
| Name of Employer<br>Novartis Vaccines & Diagnostics                                     | Occupation Executive                     | e   |   |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate                                | Year-to-Date ▼ 300.00   |   |
| SUBTOTAL of Receipts This Page (option  | 21)                                      |   | 147.90  |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  | λ)                                    | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:   PAGE 31 / 45   (check only one)   |
|--|---------------------------------------|---|--|
| Any information copied from such Reports ar or for commercial purposes, other than using | nd Statements may<br>the name and add | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions osolicit contributions from such committee. |
| NAME OF COMMITTEE (In Full)  Novartis Corporation Political Actio                        | n Committee                           |   |  |
| Full Name (Last, First, Middle Initial) David P Riedel                                   |                                       |   | Date of Receipt  |
| Mailing Address One Health Plaza   |                                       |   | M M / D D / Y Y Y Y O O O O O O O O O O O O O O O  |
| City<br>East Hanover   | State<br>NJ                           | Zip Code<br>07936   | Transaction ID: A2010-1587575  |
| FEC ID number of contributing federal political committee.                               | C                                     | 07930   | Amount of Each Receipt this Period  68.97  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupation                            |   |  |
| Receipt For:  Primary General  Other (specify) ▼   |                                       | e Year-to-Date ▼ 413.82   |  |
| Full Name (Last, First, Middle Initial) Randi C Roberts                                  |                                       |   | Date of Receipt  |
| Mailing Address One Health Plaza   |                                       |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| City   | State<br>NJ                           | Zip Code  | Transaction ID: A2010-1588450  |
| East Hanover  FEC ID number of contributing federal political committee.                 | C                                     | 07936   | Amount of Each Receipt this Period  50.00  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupation<br>Executive               |   |  |
| Receipt For:  Primary General  Other (specify) ▼   | <del></del>                           | e Year-to-Date ▼ 300.00   |  |
| Full Name (Last, First, Middle Initial) Bruce Ruscio                                     |                                       |   | Date of Receipt  |
| Mailing Address 608 Fifth Avenue   |                                       |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| City<br>New York   | State<br>NY                           | Zip Code<br>10020   | Transaction ID: A2010-1586919  Amount of Each Receipt this Period                          |
| FEC ID number of contributing federal political committee.                               | C                                     | 10020   | 80.00  |
| Name of Employer<br>Novartis Corporation   | Occupation Manager                    |   |  |
| Receipt For:  Primary General  Other (specify) ▼   |                                       | Year-to-Date ▼ 480.00   |  |
| SUBTOTAL of Receipts This Page (optional   | <u> </u>                              |   | 198.97   |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  |  | Use separate schedule(s) for each category of the Detailed Summary Page   | FOR LINE NUMBER: PAGE 32 / 45 (check only one)    X  |
|---|--|---|--|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Novartis Corporation Political Action  | e name and add                             | y not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions   |
| Full Name (Last, First, Middle Initial) Jason T Russell Mailing Address One Health Plaza  City East Hanover  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For: Primary General                    | State NJ C Occupatio Executive Aggregate   |   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| Full Name (Last, First, Middle Initial) Joseph M Simon Mailing Address One Health Plaza  City East Hanover  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For: Primary General Other (specify)     | State NJ  C  Occupatio Executive Aggregate | Zip Code<br>07936   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| Full Name (Last, First, Middle Initial) Eric M Snedecor  Mailing Address One Health Plaza  City  East Hanover  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For:  Primary General Other (specify) | State NJ C Occupatio Executive Aggregate   |   | Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: A2010-1586976  Amount of Each Receipt this Period  50.00 |
| SUBTOTAL of Receipts This Page (optional)   |  |   | 149.78   |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  | κ)                                    | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 33 / 45   (check only one)   X   11a                                  |
|--|---------------------------------------|---|---|
| Any information copied from such Reports ar or for commercial purposes, other than using | nd Statements may<br>the name and add | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Novartis Corporation Political Actio                         | n Committee                           |   |   |
| Full Name (Last, First, Middle Initial) Katherine E Solon                                |                                       |   | Date of Receipt   |
| Mailing Address One Health Plaza   |                                       |   | M M / D D / Y Y Y Y O O O O O O O O O O O O O O O   |
| City<br>East Hanover   | State<br>NJ                           | Zip Code<br>07936   | Transaction ID: A2010-1588617  Amount of Each Receipt this Period                           |
| FEC ID number of contributing federal political committee.                               | C                                     | 07300   | 250.00  |
| Name of Employer<br>Novartis Servicés Incorpo-<br>rated                                  | Occupatio<br>Executive                |   |   |
| Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼                                    | Aggregate                             | e Year-to-Date ▼<br>1500.00   |   |
| Full Name (Last, First, Middle Initial)<br>Victoria M Spry                               |                                       |   | Date of Receipt   |
| Mailing Address One Health Plaza   |                                       |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City<br>East Hanover   | State<br>NJ                           | Zip Code<br>07936   | Transaction ID: A2010-1588819   |
| FEC ID number of contributing federal political committee.                               | C                                     | 07930   | Amount of Each Receipt this Period 40.00  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive                |   |   |
| Receipt For:  Primary General  Other (specify) ▼   | <del>- ' '</del>                      | e Year-to-Date ▼ 240.00   |   |
| Full Name (Last, First, Middle Initial)<br>Lisa A Steelman                               |                                       |   | Date of Receipt   |
| Mailing Address One Health Plaza   |                                       |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| City<br>East Hanover   | State<br>NJ                           | Zip Code<br>07936   | Transaction ID: A2010-1587016  Amount of Each Receipt this Period                           |
| FEC ID number of contributing federal political committee.                               | C                                     | 07300   | 115.00  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive                |   |   |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate                             | e Year-to-Date ▼ 690.00   |   |
| SUBTOTAL of Receipts This Page (optional   | I                                     |   | 405.00  |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS   | Use separate schedule(s) for each category of the Detailed Summary Page                                  | FOR LINE NUMBER: PAGE 34 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 11   |
|---|--|---|
| NAME OF COMMITTEE (In Full)   | d Statements may not be sold or used by any personant the name and address of any political committee to |   |
| Full Name (Last, First, Middle Initial) Donald P Stevens Mailing Address One Health Plaza  City East Hanover  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For: | State Zip Code NJ 07936  C  Occupation Executive  Aggregate Year-to-Date                                 | Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: A2010-1587227  Amount of Each Receipt this Period  75.00                  |
| Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) John Suchorsky Mailing Address One Health Plaza  | 450.00   | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| City  East Hanover  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals   | State Zip Code NJ 07936  C Occupation  | Transaction ID: A2010-1587744  Amount of Each Receipt this Period  50.00  |
| Receipt For: Primary General Other (specify)  | Executive  Aggregate Year-to-Date ▼  300.00  |   |
| Full Name (Last, First, Middle Initial) Thomas A Suter Mailing Address One Health Plaza  City East Hanover  FEC ID number of contributing   | State Zip Code<br>NJ 07936   | Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 3 0 2 0 1 0  Transaction ID: A2010-1588892  Amount of Each Receipt this Period  50.00 |
| Receipt For:  Primary  Other (specify) ▼  | Occupation Public Affairs  Aggregate Year-to-Date   300.00   | 30.00   |
| SUBTOTAL of Receipts This Page (optional  | ) <b>&gt;</b>  | 175.00  |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS  | <b>(</b>                             | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 35 / 45   (check only one)   X   11a                                 |
|--|--------------------------------------|---|--|
| Any information copied from such Reports an or for commercial purposes, other than using | d Statements may<br>the name and add | y not be sold or used by any persodress of any political committee to         | on for the purpose of soliciting contributions osolicit contributions from such committee. |
| NAME OF COMMITTEE (In Full)  Novartis Corporation Political Actio                        | n Committee                          |   |  |
| Full Name (Last, First, Middle Initial) Barbara A Tombros                                |                                      |   | Date of Receipt  |
| Mailing Address One Health Plaza   |                                      |   | M M / D D / Y Y Y Y Y O D O D O D O D O D O D O D O  |
| City<br>East Hanover   | State<br>NJ                          | Zip Code<br>07936   | Transaction ID: A2010-1587687  Amount of Each Receipt this Period                          |
| FEC ID number of contributing federal political committee.                               | С                                    |   | 72.98  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupation<br>Executive              |   |  |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate                            | Year-to-Date ▼ 435.02   |  |
| Full Name (Last, First, Middle Initial) Christina M Tremains                             |                                      |   | Date of Receipt  |
| Mailing Address One Health Plaza   |                                      |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| City   | State                                | Zip Code  | Transaction ID: A2010-1587942  |
| East Hanover  FEC ID number of contributing federal political committee.                 | NJ<br>C                              | 07936   | Amount of Each Receipt this Period 63.62   |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupation<br>Executive              |   |  |
| Receipt For:  Primary General  Other (specify) ▼   |                                      | e Year-to-Date ▼ 378.98   |  |
| Full Name (Last, First, Middle Initial) Edwin Valeriano                                  |                                      |   | Date of Receipt  |
| Mailing Address One Health Plaza   |                                      |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| City<br>East Hanover   | State<br>NJ                          | Zip Code<br>07936   | Transaction ID: A2010-1588505  Amount of Each Receipt this Period                          |
| FEC ID number of contributing federal political committee.                               | C                                    |   | 50.00  |
| Name of Employer<br>Novartis Services Incorpo-<br>rated                                  | Occupation<br>Executive              | e   |  |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate                            | e Year-to-Date ▼ 300.00   |  |
|  | <u> </u>                             |   | 186.60   |

| City State Zip Code East Hanover NJ 07936  FEC ID number of contributing tederal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Stephan M Webb  Malling Address One Health Plaza  City State Zip Code NJ 07936  FEC ID number of contributing tederal political committee.  C   | I                                       | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS                                    | Statements ma  | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 36 / 45 (check only one)    X              |
|---|---|--|----------------|---|--|
| A. Andrew J Volante  Mailling Address One Health Plaza  City State Zip Code Transaction ID: A2010-1587581  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Number of Employer Novaris Pharmaceuticals  Receipt For: Primary General Other (specify) ▼   | \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \ | or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | e name and ad  | dress of any political committee to                                     | o solicit contributions from such committee.                     |
| FEC ID number of contributing federal political committee.  Name of Employer Primary General Characteristical Supplies State Securitive  B. Full Name (Last, First, Middle Initial) Supplian M Webb Mailing Address One Health Plaza  City State Zip Code NJ 07936  FEC ID number of contributing federal political committee.  Name of Employer General Characteristic State Zip Code NJ 07936  Receipt For: Primary General Characteristic State Zip Code NJ 07936  C. Midhael D Webster Mailing Address One Health Plaza  City State Zip Code NJ 07936  C. Midhael D Webster Mailing Address One Health Plaza  City State Zip Code NJ 07936  C. Midhael D Webster Mailing Address One Health Plaza  City State Zip Code NJ 07936  FEC ID number of contributing federal political committee.  C. Mame of Employer State Zip Code NJ 07936  FEC ID number of contributing federal political committee.  C. Mame of Employer NJ 07936  FEC ID number of contributing federal political committee.  C. Mame of Employer NJ 07936  FEC ID number of contributing federal political committee.  C. Mame of Employer NJ 07936  FEC ID number of contributing federal political committee.  C. Mame of Employer NJ 07936  FEC ID number of contributing federal political committee.  C. Mame of Employer NJ 07936  FEC ID number of contributing federal political committee.  C. Mame of Employer NJ 07936  FEC ID number of contributing federal political committee.  C. Mame of Employer NJ 07936  FEC ID number of contributing federal political committee.  C. Mame of Employer NJ 07936  FEC ID number of contributing federal political committee.  C. Mame of Employer NJ 07936  FEC ID number of contributing federal political committee.  C. Mame of Employer NJ 07936  FEC ID number of contributing federal political committee.  C. Mame of Employer NJ 07936  FEC ID number of contributing federal political committee.  C. Mame of Employer NJ 07936  FEC ID number of contributing federal political committee.  C. Mame of Employer NJ 07936  FEC ID number of contributing federal political committee.  C | ∠<br><b>A</b> .                         | Andrew J Volante  Mailing Address One Health Plaza                           | State          | Zip Code  | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                      |
| Receipt For:  |   | FEC ID number of contributing  |                | 07936   |  |
| B. Stephan M Webb  Mailing Address One Health Plaza  City State Zip Code East Hanover NJ 07936  FEC ID number of contributing federal political committee.  NJ 07936  C. State Zip Code NJ 07936  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Full Name (Last, First, Middle Initial)  City State Zip Code Mailing Address One Health Plaza  City State Zip Code NJ 07936  Date of Receipt  Transaction ID: A2010-1588046  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: A2010-1588046  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: A2010-1587899  Amount of Each Receipt this Period  Transaction ID: A2010-1587899  Amount of Each Receipt this Period  Executive  Receipt For: Name of Employer Novartis Pharmaceuticals  Receipt For: Primary General Other (specify)  Aggregate Year-to-Date  Aggregate Year- |   | Receipt For: Primary General   | Executiv       | e<br>e Year-to-Date ▼   |  |
| City State Zip Code NJ 07936  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Full Name (Last, First, Middle Initial) City State Zip Code East Hanover NJ 07936  Fall Name (Last, First, Middle Initial) City State Zip Code East Hanover NJ 07936  FEC ID number of contributing federal political committee.  C. Name of Employer Novartis Pharmaceuticals  Fell Name (Last, First, Middle Initial) City State Zip Code Transaction ID: A2010-1587899  Amount of Each Receipt This Period  Date of Receipt  Transaction ID: A2010-1588046  Amount of Each Receipt this Period  Transaction ID: A2010-1587899  Amount of Each Receipt this Period  C Transaction ID: A2010-1587899  Amount of Each Receipt this Period  Adject State St | -<br>В.                                 | Stephan M Webb   |                |   | M M / D D / Y Y Y Y  |
| Receipt For:  |   | East Hanover FEC ID number of contributing                                   | NJ             | •   | Transaction ID: A2010-1588046 Amount of Each Receipt this Period |
| Mailing Address One Health Plaza  City State Zip Code East Hanover NJ 07936  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For: Primary General Other (specify) ▼  Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |   | Receipt For: Primary General   | Executiv       | e<br>e Year-to-Date ▼   |  |
| East Hanover  FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For:  Primary General Other (specify) ▼  Amount of Each Receipt this Period  44.77  Amount of Each Receipt this Period  44.77  | С.                                      | Michael D Webster  | 1              |   | M M / D D / Y Y Y Y  |
| FEC ID number of contributing federal political committee.  Name of Employer Novartis Pharmaceuticals  Receipt For: Primary General Other (specify)  Occupation Executive  Aggregate Year-to-Date  265.18   |   | •  |                | ·   |  |
| Receipt For: Primary General Other (specify)   Aggregate Year-to-Date   265.18  |   | FEC ID number of contributing  |                |   |  |
| Primary General Other (specify) ▼  265.18   |   | Name of Employer<br>Novartis Pharmaceuticals                                 |                |   |  |
| 194.77  |   | Primary General  | <del>, '</del> | e Year-to-Date ▼  |  |
| SUBTOTAL of Receipts This Page (optional)   |   | SUBTOTAL of Receipts This Page (optional)                                    |                |   | 194.77   |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS  | )                              | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 37 / 45 (check only one)    X  |
|--|--------------------------------|---|--|
| Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  Novartis Corporation Political Action | the name and ad                | y not be sold or used by any perso<br>dress of any political committee to     | on for the purpose of soliciting contributions of solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Jane E Welborn Mailing Address One Health Plaza  |                                |   | Date of Receipt  |
| Mailing Address One Health Plaza  City  East Hanover   | State<br>NJ                    | Zip Code<br>07936   | Transaction ID: A2010-1587269  Amount of Each Receipt this Period                            |
| FEC ID number of contributing federal political committee.   | C                              |   | 52.67  |
| Name of Employer<br>Novartis Pharmaceuticals<br>Receipt For:   | Occupation Executive Aggregate |   |  |
| Primary General Other (specify) ▼  |                                | 314.68  |  |
| Full Name (Last, First, Middle Initial) John H Willson Mailing Address One Health Plaza  |                                |   | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                 |
| City   | State                          | Zip Code  | Transaction ID: A2010-1588534  |
| East Hanover   | NJ                             | 07936   | Amount of Each Receipt this Period   |
| FEC ID number of contributing federal political committee.   | C                              |   | 50.00  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive         |   |  |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate                      | Year-to-Date ▼ 300.00   |  |
| Full Name (Last, First, Middle Initial)<br>Stephen A Woolford  | •                              |   | Date of Receipt  |
| Mailing Address One Health Plaza   |                                |   | 06 30 2010   |
| City   | State                          | Zip Code  | Transaction ID: A2010-1587814  |
| East Hanover  FEC ID number of contributing federal political committee.   | NJ<br>C                        | 07936   | Amount of Each Receipt this Period  50.00  |
| Name of Employer<br>Novartis Pharmaceuticals   | Occupatio<br>Executive         |   |  |
| Receipt For: Primary General Other (specify)   | Aggregate                      | Year-to-Date ▼ 300.00   |  |
| SUBTOTAL of Receipts This Page (optional   | )                              |   | 152.67   |

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

FOR LINE NUMBER: PAGE 38 / 45 Use separate schedule(s) (check only one) for each category of the 11a 11b 11c **Detailed Summary Page** 13 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) Date of Receipt Anthony J Yost Mailing Address One Health Plaza 06 30 2010 City State Zip Code Transaction ID: A2010-1588890 East Hanover NJ 07936 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Novartis Pharmaceuticals Occupation Executive Receipt For: Aggregate Year-to-Date Primary General 300.00 Other (specify)

| SUBTOTAL of Receipts This Page (optional)           | <b>•</b> | 50.00   |
|---|----------|---------|
| TOTAL This Period (last page this line number only) | <b>•</b> | 7926.86 |

В.

### **SCHEDULE B (FEC Form 3X)**

President

District:

FOR LINE NUMBER: PAGE 39 / 45 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 29 30b 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) Transaction ID: B294933 **Novartis Corporation** Date of Disbursement 2 9 0 6 2010 Mailing Address One Health Plaza City State Zip Code Amount of Each Disbursement this Period East Hanover NJ 07936 1395.00 Purpose of Disbursement Reimburse corporation for TN admin expense 001 Candidate Name Category/ Type Office Sought: Disbursement For: 2010 House Senate Primary General President X Other (specify) State: TN District: Not Applicable Full Name (Last, First, Middle Initial) Transaction ID: B333000 **Novartis Corporation** Date of Disbursement 2 9 0 6 2010 Mailing Address One Health Plaza City State Zip Code Amount of Each Disbursement this Period 07936 East Hanover NJ 517.50 Purpose of Disbursement Reimburse corporation for TN admin expense 001 Candidate Name Category/ Type Office Sought: 2010 House Disbursement For: Senate Primary General

| SUBTOTAL of Disbursements This Page (optional)      | • | 1912.50 |
|---|---|---------|
| TOTAL This Period (last page this line number only) | • | 1912.50 |

X Other (specify)

Not Applicable

State: TN

В.

C.

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                            | FOR LINE          | NUMBER:                             | PAGE 40 / 45                            |
|---|---|-------------------|-------------------------------------|---|
| ITEMIZED DISBURSEMENTS  | for each category of the                            | (check only       | -                                   |   |
|   | Detailed Summary Page                               | 21b -             | 22 X 23<br>28a 28b                  | 24 25 26<br>28c 29 30b                  |
| Any Information copied from such Reports and Staten                 |   |                   | or the purpose of so                |   |
| or for commercial purposes, other than using the name               | e and address of any political co                   | mmittee to soli   | cit contributions fro               | om such committee                       |
| NAME OF COMMITTEE (In Full)   | itt   |                   |                                     |   |
| Novartis Corporation Political Action Com                           | millee  |                   |                                     |   |
| Full Name (Last, First, Middle Initial)                             |   |                   | Transaction ID:                     | B331149                                 |
| Friends of Blanche Lincoln  |   |                   | Date of Disburse                    |   |
| Mailing Address 303 Massachusetts Ave.                              | NE  |                   | 06 / 0                              | 7 2010                                  |
| City<br>Washington  | State Zip Code<br>DC 20002                          |                   | Amount of Each                      | Disbursement this Period                |
| Purpose of Disbursement<br>Contribution                             | Г   | 011               |                                     | 2500.00                                 |
| Candidate Name<br>Blanche L Lincoln                                 |   | Category/<br>Type |                                     |   |
| χ Senate  | ement For: 2010 Primary General Other (specify)     |                   |                                     |   |
|   | Primary   |                   |                                     |   |
| Full Name (Last, First, Middle Initial) Senate Majority Fund        |   |                   | Transaction ID:<br>Date of Disburse |   |
| Mailing Address 507 Capitol Court NE #1                             | 00  |                   | 06 2                                | 9 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Sur Capitol Court IVE #1  | 00  |                   |                                     |   |
| City<br>Washington  | State Zip Code DC 20002                             |                   | Amount of Each                      | Disbursement this Period                |
| Purpose of Disbursement   | 20002   |                   |                                     | 2500.00                                 |
| Contribution  |   | 011               |                                     |   |
| Candidate Name  |   | Category/         |                                     |   |
| Office Sought: House Disburse                                       | ement For: 2010                                     | Туре              |                                     |   |
| Senate  | Primary General                                     |                   |                                     |   |
|   | Other (specify)                                     |                   |                                     |   |
| State: AZ District: Not Ap  Full Name (Last, First, Middle Initial) | olicable  |                   |                                     | Bassass                                 |
| Georgians for Isakson   |   |                   | Transaction ID:<br>Date of Disburse |   |
| Mailing Address   |   |                   | 06 / 2                              | 9 2010                                  |
| Mailing Address 900 19th St. NW 8th Flo                             |   | 0 0               | 2010                                |   |
| City<br>Washington  | State Zip Code<br>DC 20006                          |                   | Amount of Each                      | Disbursement this Period                |
| Purpose of Disbursement<br>Contribution                             | 011   |                   | 1000.00                             |   |
| Candidate Name<br>Johnny Isakson                                    |   | Category/<br>Type |                                     |   |
| X Senate President  | ement For: 2010 Primary X General Other (specify) ▼ |                   |                                     |   |
| State: GA District:   |   |                   |                                     |   |
| SUBTOTAL of Disbursements This Page (optional)                      |   | <u> </u>          |                                     | 6000.00                                 |
| TOTAL This Period (last page this line number only)                 |   | ▶                 |                                     |   |

|               |  | O (FEC FOIIII  | •           |  | arate schedule(s)            | J |                   | OR LINE<br>neck only |           | R:    |                  |        | PA        | GE  | 41 / 4   | 5      |
|---------------|--|--|-------------|--|------------------------------|---|-------------------|----------------------|-----------|-------|------------------|--------|-----------|-----|----------|--------|
| ITE           | MIZED DIS  | SBURSEMEN  | TS          |  | category of the Summary Page |   |                   | 21b 27               | 22<br>28a | Х     | 23<br>28b        |        | 24<br>28c | П   | 25<br>29 | 2<br>3 |
| or for        | r commercial pur<br>IAME OF COMM   | ed from such Reports<br>rposes, other than usin<br>MITTEE (In Full)<br>oration Political Act | ng the name | and addres                                     |                              |   |                   |                      |           |       |                  |        |           |     |          |        |
| F             | Full Name (Last, Friends of Jim  | First, Middle Initial)<br>Marshall<br>586 Orange Str   | reet        |  |                              |   |                   |                      | Date      |       | ion ID<br>isburs |        |           |     | 0 Ĭ 0    | Y      |
| N             | City<br>Macon  |  |             | State<br>GA                                    | Zip Code<br>31201            |   |                   |                      | Amou      | ınt o | f Each           | n Disk | ourse     | -   |          | -      |
|               | Purpose of Disbu<br>Contribution<br>Candidate Name<br>Iim Marshall<br>Office Sought: | x House  | Diahuraa    | ment For:                                      | 2010                         |   | 01<br>ateg<br>Typ | jory/                |           |       |                  | •      |           | .25 | 50.00    |        |
| S             | State: GA  | Senate President District: 08  First, Middle Initial)  |             | Primary Other (spe                             | General                      |   |                   |                      |           |       |                  |        |           |     |          |        |
| J             | •  | I for Congress P.O. Box 75214  | 4           |  |                              |   |                   |                      | Date      |       | ion ID<br>isburs |        |           |     | 0 1 0    | Y      |
|               | City<br>Vashington   |  |             | State<br>DC                                    | Zip Code<br>20013            |   |                   |                      | Amou      | ınt o | f Each           | n Disk | ourse     |     |          |        |
| $\frac{1}{C}$ | Purpose of Disbu<br>Contribution<br>Candidate Name<br>John D Dingell                 |  |             |  |                              |   | 01<br>ateg        | jory/                | L.        |       |                  | •      |           | 100 | 00.00    | •      |
|               | Office Sought:   | X House Senate President District: 15  | Disburse    | ment For:<br>Primary<br>Other (spe             | 2010  X General ecify)       |   |                   |                      |           |       |                  |        |           |     |          |        |
|               | Full Name (Last, l<br>House Conserv  | First, Middle Initial)<br>vatives Fund   |             |  |                              |   |                   |                      |           | of D  | isburs           | emer   |           | 92  |          |        |
| N             | Mailing Address  | 228 S. Washin  | gton St. S  | Suite 115                                      |                              |   |                   |                      | 0 6       | М     | / D2             | 2 9    | / Y       | ž   | 0 Í 0    | Y      |
|               | City<br>Alexandria   |  |             | State<br>VA                                    | Zip Code<br>22314            |   |                   |                      | Amou      | ınt o | f Each           | n Disk | ourse     | -   |          | -      |
| C             | Purpose of Disbu<br>Contribution<br>Candidate Name                                   | rsement  |             |  |                              |   | 01<br>ateg        | jory/                | L.        |       |                  | •      |           | 250 | 00.00    | •      |
|               | Office Sought:   | House Senate President District:   |             | ment For:<br>Primary<br>Other (spe<br>llicable | 2010 General                 |   |                   |                      |           |       |                  |        |           |     |          |        |
|               |  | oursements This Page   |             |  |                              |   |                   | •                    |           |       |                  |        | •         | 375 | 0.00     |        |

В.

C.

| SCHEDULE B (FEC Form 3X)   |  | Use separate schedule(s)      |    |     |               | NE NUMBER: PAGE 42 / 45 only one) |                  |      |                  |     |               |     |          |                |           |
|--|--|-------------------------------|----|-----|---------------|-----------------------------------|------------------|------|------------------|-----|---------------|-----|----------|----------------|-----------|
| ITEMIZED DISBURSEMENTS   | FED DISBURSEMENTS    for each category of the Detailed Summary Page   21b   27 |                               |    |     |               | H                                 | 22<br>28a        | X    | 23<br>28b        | F   | 24<br>28c     |     | 25<br>29 | $\vdash$       | 26<br>30b |
| Any Information copied from such Reports and State or for commercial purposes, other than using the na |  |                               |    |     |               |                                   |                  |      |                  |     |               |     |          | 5              |           |
| NAME OF COMMITTEE (In Full)  |  |                               |    |     |               |                                   |                  |      |                  |     |               |     |          |                |           |
| Novartis Corporation Political Action Con  | nmittee  |                               |    |     |               |                                   |                  |      |                  |     |               |     |          |                |           |
| Full Name (Last, First, Middle Initial)<br>Nelson 2012   |  |                               |    |     |               |                                   | Trans<br>Date of |      |                  |     | B3329<br>nent | 985 |          |                |           |
| Mailing Address 420 C Street NE  |  |                               |    |     |               |                                   | 0 <sup>M</sup> 6 | М    | D 2              | 2 6 | 9 /           | Ž   | 0 1 (    | ) <sup>Y</sup> |           |
| City<br>Washington   | State<br>DC  | Zip Code<br>20002             |    |     |               |                                   | Amou             | nt o | f Each           | ı C | isburse       | men | t this I | Period         | _         |
| Purpose of Disbursement Contribution   |  |                               |    | 0   | 11            |                                   |                  | _    |                  |     |               | 20  | 00.00    | )              |           |
| Candidate Name<br>Ben Nelson   |  |                               |    |     | egory/<br>/pe |                                   |                  |      |                  |     |               |     |          |                |           |
| χ Senate President   | sement For:<br>Primary<br>Other (spe   | 2012<br>X General<br>ecify) ▼ |    |     |               |                                   |                  |      |                  |     |               |     |          |                |           |
| State: NE District:  |  |                               |    |     |               |                                   |                  |      |                  |     |               |     |          |                |           |
| Full Name (Last, First, Middle Initial) Rush Holt for Congress   |  |                               |    |     |               |                                   | Trans<br>Date of |      |                  |     | B3311<br>nent | 48  |          |                |           |
| Mailing Address PO Box 782   | dress PO Box 782   |                               |    |     |               |                                   | 0 <sup>M</sup> 6 | М    | <sup>′</sup> C   | ) 7 | 7 /           | ž   | 0 1 (    | ) <sup>Y</sup> |           |
| City<br>Pennington   | State<br>NJ  | Zip Code<br>08534             |    |     |               |                                   | Amou             | nt o | f Each           | ı C | isburse       |     |          |                | _         |
| Purpose of Disbursement<br>Contribution  |  |                               |    | Ó   | 11            |                                   |                  | 0    |                  |     |               | 10  | 00.00    | )              | _         |
| Candidate Name<br>Rush D Holt  |  |                               |    |     | egory/<br>vpe |                                   |                  |      |                  |     |               |     |          |                |           |
| Senate President   | sement For: X Primary Other (spe   | 2010 General                  |    |     |               |                                   |                  |      |                  |     |               |     |          |                |           |
| State: NJ District: 12   |  |                               |    |     |               |                                   |                  |      |                  |     |               |     |          |                |           |
| Full Name (Last, First, Middle Initial)<br>Rothman for New Jersey                                      |  |                               |    |     |               |                                   | Date             | of D | sburs            | en  |               | 98  |          |                |           |
| Mailing Address P.O. Box 714   |  |                               |    |     |               |                                   | 0 <sup>M</sup> 6 | М    | <sup>′</sup> □ C | ) 7 | 7 /           | ž   | 0 ť (    | ) <sup>Y</sup> |           |
| City<br>Hackensack   | State<br>NJ  | Zip Code<br>07602             |    |     |               |                                   | Amou             | nt o | f Each           | ı C | Disburse      | -   |          |                | _         |
| Purpose of Disbursement<br>Contribution  |  |                               |    | ٥   | 11            |                                   | L.               |      |                  |     | -             | 25  | 00.00    | )              | _         |
| Candidate Name<br>Steven R Rothman   |  |                               | Ca | ate | egory/<br>/pe |                                   |                  |      |                  |     |               |     |          |                |           |
| Senate   | sement For: X Primary  | 2010<br>General               |    | _   |               |                                   |                  |      |                  |     |               |     |          |                |           |
| State: NJ District: 09   | Other (spe   | ecity) 🔻                      |    |     |               |                                   |                  |      |                  |     |               |     |          |                |           |
| SUBTOTAL of Disbursements This Page (optional  | )  |                               |    |     |               |                                   |                  | _    | •                |     | •             | 550 | 00.00    | )              | _<br>1    |
| CODITION OF DISDUISEMENTS THIS Fage (Optional  | ,  |                               |    | ••• |               |                                   |                  | _    |                  |     |               |     | ,        |                | 4         |

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

| City State Zip Code VA 22301  Purpose of Disbursement Contribution Candidate Name John A Boehner  Office Sought: X House Primary X General Primary X General Other (specify) ▼  Full Name (Last, First, Middle Initial) Citizens for Altmire  Amount of Each Disbursement this Permander To State Zip Code VA 22301  Amount of Each Disbursement this Permander To State Zip Code VA 22301  2500.00  Contribution  Other (specify) ▼  Transaction ID: B330716 Date of Disbursement  | SCHEDULE B (FEC Form 3X)                | Use separate schedule(s | ) FOR LINE (check only | NUMBER:<br>v one)    | PAGE 43 / 45       |
|---|---|-------------------------|------------------------|----------------------|--------------------|
| NAME OF COMMITTEE (In Full) Novartis Corporation Political Action Committee  Full Name (Last, First, Middle Initial) Friends of John Boehner  Mailing Address 104 Hume Avenue  City Senate President Office Sought: X House Assington DC 20003 Purpose of Disbursement Contribution City Senate President State: PA District: 04  Full Name (Last, First, Middle Initial) City State Zip Code Disbursement Contribution City Senate President Contribution Candidate Name Jason Altmire  Mailing Address 3440 Hamilton Boulevard  City Senate President State: PA Islane Candidate Name Jason Altmire  Mailing Address 3440 Hamilton Boulevard  City Senate President Contribution Candidate Name Jason Altmire  Mailing Address 3440 Hamilton Boulevard  City Senate President Contribution Candidate Name President State: PA District: 04  Full Name (Last, First, Middle Initial) Citizens for Altmire  Office Sought: X House Disbursement For: 2010 Purpose of Disbursement Contribution Candidate Name President State: PA District: 04  Full Name (Last, First, Middle Initial) City State Zip Code Disbursement Contribution Candidate Name President Presid |   | Detailed Summary Page   | 27                     | 28a 28b 2            | 8c 29              |
| NAME OF COMMITTEE (In Full) Novartis Corporation Political Action Committee  Full Name (Last, First, Middle Initial) Friends of John Boehner Mailing Address 104 Hume Avenue  City State Zip Code Alexandria VA Z2301  Purpose of Disbursement Contribution Condidate Name John A Boehner  Office Sought: X House President State: OH District: 08  Full Name (Last, First, Middle Initial) City Sanate President State: OH District: 08  Full Name (Last, First, Middle Initial) City State Zip Code Washington DC Z0003  Purpose of Disbursement Contribution Condidate Name Jason Altmire  Office Sought: X House President State: OH District: 08  Full Name (Last, First, Middle Initial) City State Zip Code Washington DC Z0003  Purpose of Disbursement Contribution Condidate Name Jason Altmire  Office Sought: X House President State: PA District: 04  Full Name (Last, First, Middle Initial) Toomey for Senate  Mailing Address 3440 Hamilton Boulevard  City State Zip Code PA 18103  Transaction ID: B330716 Date of Disbursement this Peresident Category/ Type  Amount of Each Disbursement this Peresident Date of Disbursement this Peresident Contribution Candidate Name Jason Altmire  Office Sought: House PA 18103  Purpose of Disbursement Contribution Candidate Name Pat Toomey Office Sought: House PA 18103  Purpose of Disbursement Contribution Candidate Name Pat Toomey Office Sought: House President |   |                         |                        |                      |                    |
| Friends of John Boehner  Mailing Address 104 Hume Avenue  City State Zip Code Alexandria VA 22301  Purpose of Disbursement Contribution Candidate Name John A Boehner  Office Sought: X House Senate President State: OH District: 08  Full Name (Last, First, Middle Initial) Citizens for Altmire  Mailing Address 499 S. Capitol St. SW Suite 404  City Washington DC 20003  Purpose of Disbursement Contribution Candidate Name Jason Altmire  Office Sought: X House Senate Primary X General Primary X Gene | NAME OF COMMITTEE (In Full)             |                         |                        |                      |                    |
| City Alexandria   |   |                         |                        |                      | 30713              |
| Alexandria  VA 22301  Purpose of Disbursement Contribution  Office Sought:  | Mailing Address 104 Hume Avenue         |                         |                        | 06 / 03              | y žo jo            |
| Contribution Candidate Name John A Boehner  Office Sought:  |   |                         |                        | Amount of Each Disbu |                    |
| John A Boehner  Office Sought:  |   |                         | 011                    |                      | 2500.00            |
| Senate President State: OH District: 08  Full Name (Last, First, Middle Initial) Citizens for Altmire  Mailing Address 499 S. Capitol St. SW Suite 404  City Washington DC 20003  Purpose of Disbursement Contribution Candidate Name Jason Altmire  Office Sought:  X House President State: PA District: 04  Full Name (Last, First, Middle Initial) Contribution Condidate Name Jason Altmire  Disbursement For: Primary General Other (specify)  Transaction ID: B330716 Date of Disbursement  0 6 M / 0 0 3 / 2 0 1 0 7  Amount of Each Disbursement this Per  1011 Category/ Type  Transaction ID: B332995 Date of Disbursement  0 6 M / 0 0 3 / 2 0 1 0 7  Amount of Each Disbursement this Per  1011 Category/ Type  Transaction ID: B332995 Date of Disbursement  0 6 M / 0 2 9 / 2 0 1 0 7  Amount of Each Disbursement  1000.00  Amount of Each Disbursement  1000.00  Amount of Each Disbursement this Per  1011 Category/ Type  Transaction ID: Category/ Type  Transaction ID: Category/ Type  Office Sought:  Amount of Each Disbursement this Per  1000.00  Office Sought:  Amount of Each Disbursement this Per  1000.00  Amount of Each Disbursement this Per  1000.00  Office Sought:  Amount of Each Disbursement this Per  1000.00  Office Sought:  Office Sought:  Amount of Each Disbursement this Per  1000.00  Office Sought:  Office Sou |   |                         |                        |                      |                    |
| Full Name (Last, First, Middle Initial) Citizens for Altmire  Mailing Address 499 S. Capitol St. SW Suite 404  City Washington Purpose of Disbursement Contribution Candidate Name Jason Altmire  District: 04  Full Name (Last, First, Middle Initial) Transaction ID: B330716 Date of Disbursement  Mailing Address 499 S. Capitol St. SW Suite 404  Amount of Each Disbursement this Permany Type  Amount of Each Disbursement this Permany Type  Coffice Sought:  X House Primary Ageneral Other (specify)  Full Name (Last, First, Middle Initial) Transaction ID: B332995 Date of Disbursement  Mailing Address 3440 Hamilton Boulevard  City Allentown Purpose of Disbursement Contribution Candidate Name Pat Toorney  Office Sought:  X Senate President  Disbursement For:  2010  Amount of Each Disbursement this Permany Transaction ID: B332995 Date of Disbursement  Mailing Address 3440 Hamilton Boulevard  Amount of Each Disbursement this Permany Type  Office Sought:  X Senate Primary Ageneral Other (specify) Type  Other (specify) Type   | Senate                                  | Primary X General       |                        |                      |                    |
| Citizens for Altmire  Mailing Address 499 S. Capitol St. SW Suite 404  City State Zip Code Washington DC 20003  Purpose of Disbursement Contribution  Candidate Name Jason Altmire  Office Sought: X House Senate Primary X General Other (specify) ▼  Full Name (Last, First, Middle Initial) Toomey for Senate  Mailing Address 3440 Hamilton Boulevard  City State Zip Code Amount of Each Disbursement this Permany X General Other (specify) ▼  Transaction ID: B332995 Date of Disbursement Toomey for Senate  Mailing Address 3440 Hamilton Boulevard  City State Zip Code Allentown PA 18103  Purpose of Disbursement Contribution  Candidate Name Pat Toomey  Office Sought: New Y Y 2 0 1 0 Y Y 2 0 1 0 Y Y 2 0 1 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |   | •                       |                        |                      |                    |
| City Washington Disbursement Contribution Candidate Name Jason Altmire Disbursement For: 2010   | •                                       |                         |                        | Date of Disbursement | 30716              |
| Washington DC 20003  Purpose of Disbursement Contribution Candidate Name Jason Altmire  Office Sought: X House Senate Primary X General Other (specify) ▼  Full Name (Last, First, Middle Initial) Toomey for Senate  Mailing Address 3440 Hamilton Boulevard  City State Zip Code Allentown PA 18103  Purpose of Disbursement Contribution Candidate Name Pat Toomey  Office Sought: House Disbursement For: 2010  Candidate Name Pat Toomey  Office Sought: House Primary X General Other (specify) ▼  Amount of Each Disbursement this Permary X General Other (specify) ▼  Office Sought: House Primary X General Other (specify) ▼  Other (specify) ▼  | Mailing Address 499 S. Capitol St. SW S | uite 404                |                        | 06 / 03              | y yo yo y          |
| Purpose of Disbursement Contribution Candidate Name Jason Altmire  Office Sought:   |   |                         |                        | Amount of Each Disbu | rsement this Perio |
| Candidate Name Jason Altmire  Office Sought:  | Purpose of Disbursement                 | 20000                   | 011                    |                      | 500.00             |
| Senate Primary X General Other (specify) ▼  Full Name (Last, First, Middle Initial) Toomey for Senate  Mailing Address 3440 Hamilton Boulevard  City State Zip Code Allentown PA 18103  Purpose of Disbursement Contribution  Candidate Name Pat Toomey  Office Sought: House X Senate Primary X General Other (specify) ▼  Transaction ID: B332995 Date of Disbursement  M M M M D D D M Y Y Y Y Y Y Y Y Y Y Y Y   | Candidate Name                          |                         | Category/              |                      |                    |
| Full Name (Last, First, Middle Initial) Toomey for Senate  Mailing Address 3440 Hamilton Boulevard  City State Zip Code Allentown PA 18103  Purpose of Disbursement Contribution Candidate Name Pat Toomey  Office Sought: House X Senate President President  Full Name (Last, First, Middle Initial)  Transaction ID: B332995  Date of Disbursement  Amount of Each Disbursement this Per Category/ Type  Amount of Each Disbursement this Per Category/ Type  Office Sought: Primary X General Other (specify) ▼   | Senate President                        | Primary X General       |                        |                      |                    |
| Toomey for Senate  Mailing Address 3440 Hamilton Boulevard  City State Zip Code Allentown PA 18103  Purpose of Disbursement Contribution  Candidate Name Pat Toomey  Office Sought: House X Senate Primary X General President  Date of Disbursement  M M M D D D D D D D D D D D D D D D D   |   |                         |                        | Transaction ID: B33  | 32995              |
| City State Zip Code Allentown PA 18103  Purpose of Disbursement Contribution Candidate Name Pat Toomey  Office Sought:    Disbursement For:   | Toomey for Senate                       |                         |                        | Date of Disbursement |                    |
| Allentown PA 18103  Purpose of Disbursement Contribution  Candidate Name Pat Toomey  Office Sought: House X Senate Primary X General President Other (specify)   Other (specify)   Allentown PA 18103  1000.00  1011  Category/ Type  Other (specify)   Other (specify)   | Mailing Address 3440 Hamilton Boulevard | i                       |                        | 06 29                | 2010               |
| Contribution  Candidate Name Pat Toomey  Office Sought:  House X Senate President  Disbursement For: Primary X General Other (specify)  |   |                         |                        | Amount of Each Disbu |                    |
| Candidate Name Pat Toomey  Office Sought:  Category/ Type  Category/ Type  Category/ Type  Office Sought:  X Senate Primary President  Other (specify)  ▼   |   |                         | 011                    |                      | 1000.00            |
| Office Sought:    House   Disbursement For: 2010     X   Senate   Primary   X   General     President   Other (specify)   ▼   |   |                         | Category/              |                      |                    |
|   | χ Senate                                | Primary X General       |                        |                      |                    |
|   |   | Other (Specify)         |                        |                      |                    |

| TELLIZED DISCUSSION  | Use separate schedule(s                             | ) Check on        | E NUMBER: PAGE 44 / 45  |
|--|---|-------------------|---|
| ITEMIZED DISBURSEMENTS   | for each category of the Detailed Summary Page      | 21b<br>27         | 22 X 23 24 25 28c 29  |
| Any Information copied from such Reports and Stator for commercial purposes, other than using the national NAME OF COMMITTEE (In Full) |   |                   |   |
| Novartis Corporation Political Action Co   | nmittee   |                   |   |
| Full Name (Last, First, Middle Initial) Michael Burgess for Congress   |   |                   | Transaction ID: B332981 Date of Disbursement  |
| Mailing Address 217 Third Street SE  |   |                   | 06 0 29 7 2010  |
| City<br>Washington   | State Zip Code<br>DC 20003                          |                   | Amount of Each Disbursement this Pe   |
| Purpose of Disbursement<br>Contribution  |   | 011               | 1000.00   |
| Candidate Name Michael C. Burgess  |   | Category/<br>Type | -   |
| Office Sought: X House Disbu Senate President State: TX District: 26   | rsement For: 2010 Primary X General Other (specify) |                   |   |
| Full Name (Last, First, Middle Initial)  |   |                   | Transaction ID: B331150   |
| Road to Senate Victory Committee 2010  |   |                   | Date of Disbursement  |
| Mailing Address 507 Capitol Court NE   | #100  |                   | 06 11 2010  |
| City<br>Washington   | State Zip Code<br>DC 20002                          |                   | Amount of Each Disbursement this Pe   |
| Purpose of Disbursement<br>Contribution  |   | 011               | 3000.00   |
| Candidate Name   |   | Category/<br>Type |   |
| Office Sought: House Disbu   | rsement For: 2010 Primary General X Other (specify) |                   |   |
| State: VA District: Not A  Full Name (Last, First, Middle Initial)   | applicable  |                   |   |
| Cantor for Congress  |   |                   | Transaction ID: B332986 Date of Disbursement  |
| Mailing Address P.O. Box 21027   |   |                   | $\begin{bmatrix} 0 & 6 & M \\ 0 & 6 & M \end{bmatrix} / \begin{bmatrix} 0 & 2 & 0 \\ 0 & 2 & 9 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 1 \\ 0 & 2 & 0 & 1 \\ 0 & 0 & 0 \end{bmatrix}$ |
| City<br>Washington   | State Zip Code<br>DC 20009                          | _                 | Amount of Each Disbursement this Pe   |
| Purpose of Disbursement<br>Contribution  |   | 011               | 2500.00   |
| Candidate Name<br>Eric I Cantor  |   | Category/<br>Type |   |
| Office Sought:  X House Senate President State: VA District: 07  | rsement For: 2010 Primary X General Other (specify) |                   |   |
| <u> </u>   | JN  |                   | 6500.00   |
| SUBTOTAL of Disbursements This Page (options   |   |                   |   |
| TOTAL This Period (last page this line number or   | ly)   |                   | 25750.00  |

В.

President District:

| _         |  |   |                      |  |
|-----------|--|---|----------------------|--|
|           | CHEDULE B (FEC Form 3X)  | Use separate schedule(s)                          | FOR LINE (check only | NUMBER: PAGE 45 / 45                         |
| IT        | EMIZED DISBURSEMENTS   | for each category of the Detailed Summary Page    | 21b 27               | 22 23 24 25 26<br>28a 28b 28c X 29 30b       |
|           | y Information copied from such Reports and Statem for commercial purposes, other than using the name |   |                      |  |
| $\rangle$ | NAME OF COMMITTEE (In Full)  Novartis Corporation Political Action Comm                              | nittee  |                      |  |
|           | Full Name (Last, First, Middle Initial) Cmte to Elect Rick Taylor                                    |   |                      | Transaction ID: B330715 Date of Disbursement |
|           | Mailing Address P.O. Box 866   |   |                      | 06 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0       |
|           | •  | State Zip Code<br>PA 19002                        |                      | Amount of Each Disbursement this Period      |
|           | Purpose of Disbursement<br>G-2010 State House 151 PA   |   | 011                  | 500.00                                       |
|           | Candidate Name<br>Rick Taylor  |   | Category/<br>Type    |  |
|           | Senate President   | ement For: 2010 Primary X General Other (specify) |                      |  |
|           | State: District: Full Name (Last, First, Middle Initial)   |   |                      |  |
|           | Citizens to Elect John Payne   |   |                      | Transaction ID: B332993 Date of Disbursement |
|           | Mailing Address PO Box 651   |   |                      | 06 06 7 29 7 2010                            |
|           |  | State Zip Code<br>PA 17033                        |                      | Amount of Each Disbursement this Period      |
|           | Purpose of Disbursement<br>G-2010 State House 106 PA   |   | 011                  | 500.00                                       |
|           | Candidate Name<br>John Payne   |   | Category/<br>Type    |  |
|           | Office Sought: House Disburse Senate President   | ement For: 2010 Primary X General Other (specify) |                      |  |

| SUBTOTAL of Disbursements This Page (optional)      | •        | 1000.00 |
|---|----------|---------|
| TOTAL This Period (last page this line number only) | <b>•</b> | 1000.00 |

State: