

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Novartis Corporation Political Action Committee

ADDRESS (number and street)

701 Pennsylvania Ave. NW Suite 725

Check if different
than previously
reported. (ACC)

Washington

DC

20004-2608

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00033969

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☒ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

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

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
05 01 2016

through

M M M / D D D / Y Y Y Y Y Y
05 31 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

O'Neil, Shawn, , ,

Type or Print Name of Treasurer

Signature of Treasurer

O'Neil, Shawn, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
12 08 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Novartis Corporation Political Action Committee

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
05		01		2016

To:

M M	/	D D	/	Y Y Y Y Y
05		31		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2016</td></tr></table>	Y	Y	Y	Y	Y	2016						<table><tr><td colspan="5">151151.54</td></tr></table>	151151.54				
Y	Y	Y	Y	Y													
2016																	
151151.54																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">74581.40</td></tr></table>	74581.40															
74581.40																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">16367.09</td></tr></table>	16367.09					<table><tr><td colspan="5">90728.60</td></tr></table>	90728.60									
16367.09																	
90728.60																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">90948.49</td></tr></table>	90948.49					<table><tr><td colspan="5">241880.14</td></tr></table>	241880.14									
90948.49																	
241880.14																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">21543.09</td></tr></table>	21543.09					<table><tr><td colspan="5">172474.74</td></tr></table>	172474.74									
21543.09																	
172474.74																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">69405.40</td></tr></table>	69405.40					<table><tr><td colspan="5">69405.40</td></tr></table>	69405.40									
69405.40																	
69405.40																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Novartis Corporation Political Action Committee

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 05 / 01 / 2016

To:

 M M / D D / Y Y Y Y Y
 05 / 31 / 2016
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

6343.35

21721.15

(ii) Unitemized

10023.74

69007.45

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

16367.09

90728.60

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

16367.09

90728.60

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

16367.09

90728.60

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

16367.09

90728.60

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	43.09	224.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	43.09	224.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21500.00	169500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	2750.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	21543.09	172474.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21543.09	172474.74

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	16367.09	90728.60
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16367.09	90728.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	43.09	224.74
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	43.09	224.74

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F3XA
Transaction ID :

This report is being amended to update the sub total on Line 6(d), Column B disbursement totals and the PAC beginning and ending balances. Please update your records accordingly.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 37

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

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

NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Banko, Michael, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Novartis Services Incorporated

Occupation (for Individual)

AD IT Service Management

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

253.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : A2016-924919

Amount of Each Receipt this Period

46.16

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barnett, Allison, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Novartis Pharmaceuticals

Occupation (for Individual)

AD State & Ext Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : A2016-925345

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Baron, Neilda, A, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Novartis Pharmaceuticals

Occupation (for Individual)

Ex Dir Medical Services

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : A2016-925220

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

188.16

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

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

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

FOR LINE NUMBER: PAGE 8 OF 37

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Baroni Allmon, Tracy, L, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Exec Director Health Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925228

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Borill, Troy, L, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Sr. Oncology Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.16

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925010

Amount of Each Receipt this Period

40.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brooks, Michael, D, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Sr Oncol Area Sales Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924794

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

200.28

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 37

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brunner, Thomas, R, ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis PharmaceuticalsOccupation (for Individual)
IT Expert 1

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925058

Amount of Each Receipt this Period

70.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bylancik, Angela, D, ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis PharmaceuticalsOccupation (for Individual)
Ex Dir BD&L Alliance Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924764

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Byler, Timothy, S, ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis PharmaceuticalsOccupation (for Individual)
AD State & External Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924830

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

220.00

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

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

FOR LINE NUMBER: PAGE 10 OF 37

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Campbell, Kimberley, J, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
MSL Director Oncology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924655

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cannon, Patricia, A, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Director State Health Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925285

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Casserly, Daniel, P, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Services Incorporated

Occupation (for Individual)
Head of Fed Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1523.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924806

Amount of Each Receipt this Period

276.92

☐ Memo Item

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

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

361.92

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

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

FOR LINE NUMBER: PAGE 11 OF 37

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Christensen-Boner, Barbara, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Director State&External Affrs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924708

Amount of Each Receipt this Period

61.36

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clary, Cathryn, M, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Head US CDMA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925286

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Collins, Julie, A, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Alcon Laboratories Inc.

Occupation (for Individual)
Director Digital Mktg

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

507.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924514

Amount of Each Receipt this Period

92.30

☐ Memo Item

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

353.66

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 37

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Colpitts, Scott, G, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Head of Facilities & Utility Maint. (A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925289

Amount of Each Receipt this Period

44.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Conley, Michael, A, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Exe Dir Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924837

Amount of Each Receipt this Period

46.16

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Conoshenti, Joseph, J, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Director Strategic Account Alliances

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925300

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

150.16

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Coombs, Seth, , ,

Mailing Address 350 Massachusetts Avenue

City
Cambridge

State
MA

Zip Code
02139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sandoz Inc.

Occupation (for Individual)

Executive Director Oncology Injectable

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924651

Amount of Each Receipt this Period

92.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Couture, Eric, C, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Novartis Pharmaceuticals

Occupation (for Individual)

Head Regulatory C&G TU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925195

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Deason, Terry, H, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Novartis Pharmaceuticals

Occupation (for Individual)

Research Network MSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925277

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

172.30

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Epstein, David, R, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Services Incorporated

Occupation (for Individual)
Head Pharma AG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924895

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Farber, Leo, A, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Services Incorporated

Occupation (for Individual)
Exec Dir Fed Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925322

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fellers, Thomas, S, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Medical Account Management & FME

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924949

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Frye, Neely, T, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
AD State & External Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.01

Date of Receipt

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : A2016-924847

Amount of Each Receipt this Period

128.06

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gajewski, Edward, G, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Exec Dir National & Regional Accounts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : A2016-924762

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. George, Deidre, T, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
AD State & External Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : A2016-925325

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

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

210.06

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Goldman, Lisa, M, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Exec Dir Regulatory Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925252

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Grande, Nancy, J, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Head Proc Improv & Compliance IMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925157

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Grzegorzewski, Kris, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Onco Ex Dir Clinical Res Phys

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925232

Amount of Each Receipt this Period

80.00

☐ Memo Item

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

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

280.00

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Guidi, Joseph, M, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Director Commercial Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925216

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gulick, David, E, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Director Startegic Market Acc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924722

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Habel, Kurt, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Asc Dir Incentive Modeling/Des

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

253.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924872

Amount of Each Receipt this Period

46.16

☐ Memo Item

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

146.16

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

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Haller, Sarah, E, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Novartis Services Incorporated

Occupation (for Individual)

VP Intl Public Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.00

Date of Receipt

05 / 31 / 2016

Transaction ID : A2016-924835

Amount of Each Receipt this Period

154.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hayden, Kathy-Jo, B, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Novartis Pharmaceuticals

Occupation (for Individual)

Director Public Health Policy

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

05 / 31 / 2016

Transaction ID : A2016-924851

Amount of Each Receipt this Period

70.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hilkert, Robert, J, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Novartis Pharmaceuticals

Occupation (for Individual)

Medical Unit Head Critcl Care

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

253.88

Date of Receipt

05 / 31 / 2016

Transaction ID : A2016-925184

Amount of Each Receipt this Period

46.16

☐ Memo Item

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

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

270.16

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

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hough, Charles, F, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Services Incorporated

Occupation (for Individual)
Head Strategy and Stakeholder Engage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925212

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hughes, Donald, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Dir Insurance Exchange Ext Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925346

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hughson, Melody, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Ex Director Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925254

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

200.00

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kamal, Tawfik, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
IACH-Capability Bldg Academy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : A2016-924901

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kan, Sarah, G, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Asc Dir State & Ext Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.00

Date of Receipt

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : A2016-925304

Amount of Each Receipt this Period

154.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kendris, Thomas, N, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
VPGeneral CounselNPCCountry

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

507.65

Date of Receipt

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : A2016-924675

Amount of Each Receipt this Period

92.30

☐ Memo Item

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

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

296.30

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Klinger, Shannon, T, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
Global Head Lgl & Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924652

Amount of Each Receipt this Period

115.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kowalski, Robert, W, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Expat_CH_Global Head DRA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925233

Amount of Each Receipt this Period

46.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kulesher, Kathleen, M, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Assoc. Dir. State and External Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925306

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

211.53

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Leas, Leigh Anne, A, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
VP Health Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.00

Date of Receipt

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : A2016-925145

Amount of Each Receipt this Period

154.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lennon, David, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Oncology Business Franchise Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : A2016-925347

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lloyd, Richard, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Head US Oncology Mgd Markets & Mkt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

507.65

Date of Receipt

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : A2016-925213

Amount of Each Receipt this Period

92.30

☐ Memo Item

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

446.30

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 23 OF 37

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lockwood, Jeffrey, W, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NIBRI

Occupation (for Individual)
Head NIBR Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924629

Amount of Each Receipt this Period

46.16

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Matthews, William, R, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Sr Oncol Area Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.68

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924841

Amount of Each Receipt this Period

47.06

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McBride, Catharine, M, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
AD State & External Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924790

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

193.22

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 37
(check only one)

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McGough, Edward, D, ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Alcon Laboratories Inc.Occupation (for Individual)
SVP Global Mfg & Tech Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1269.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : A2016-924546

Amount of Each Receipt this Period

230.76

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Menichini, Gary, J, ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Alcon Laboratories Inc.Occupation (for Individual)
VP/GM U.S. Pharmaceuticals

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : A2016-924513

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Millard, Susan, J, ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Alcon Laboratories Inc.Occupation (for Individual)
Head HR Alcon R&D

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : A2016-924518

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

330.76

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

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

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

FOR LINE NUMBER: PAGE 25 OF 37
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Moore, Stacey, L.,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Resp Integrated Account Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.67

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924776

Amount of Each Receipt this Period

37.34

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Myrie, Donna, H.,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Associate Director Contracting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924862

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'Neil, Shawn, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Services Incorporated

Occupation (for Individual)
Ex Dir Legislative Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925244

Amount of Each Receipt this Period

156.00

☐ Memo Item

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

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

243.34

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

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

FOR LINE NUMBER: PAGE 26 OF 37
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Olmstead, Sharon, N, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
VP GL.Hd Reg Policy & Intelli

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.88

Date of Receipt

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : A2016-925258

Amount of Each Receipt this Period

46.16

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Osten, Craig, S, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Finance Corporation

Occupation (for Individual)
Vice President & Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.88

Date of Receipt

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : A2016-924680

Amount of Each Receipt this Period

46.16

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Oxner, Serafina, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Ex Dir Healthcare Contract Adm

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

253.88

Date of Receipt

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : A2016-924929

Amount of Each Receipt this Period

46.16

☐ Memo Item

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

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

138.48

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

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

FOR LINE NUMBER:
(check only one)

PAGE 27 OF 37

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Phipps, Candice, C, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Novartis Services Incorporated

Occupation (for Individual)

Director Federal Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.00

Date of Receipt

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : A2016-925316

Amount of Each Receipt this Period

220.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Renz, Elizabeth, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sandoz Inc.

Occupation (for Individual)

Director Communications for Biopharm.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : A2016-924654

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodgers, Renee, C, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Novartis Pharmaceuticals

Occupation (for Individual)

Head Digital Strategy And Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : A2016-925260

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

340.00

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

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

FOR LINE NUMBER: PAGE 28 OF 37
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Russell, Jason, T, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
Assoc Dir National Accts Spec Pharm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.44

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924635

Amount of Each Receipt this Period

68.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ryan, Alan, D, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
Dir. US Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924642

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sacks, Harry, J, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
VP Medl & Scientific Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925288

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

148.08

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 37
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sanderson, Adwoa, A, ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis PharmaceuticalsOccupation (for Individual)
Ex Dir Advocacy & Access

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : A2016-925311

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schweitzer, Mark, G, ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Services IncorporatedOccupation (for Individual)
Gbl Head Analytical Science & Technol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : A2016-925321

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Shaw, Christi, L, ,

Mailing Address 608 Fifth Avenue

City
New YorkState
NYZip Code
10020FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis PharmaceuticalsOccupation (for Individual)
US Country President & President NPC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : A2016-925245

Amount of Each Receipt this Period

120.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

270.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 37

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

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Simon, Joseph, M, ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis PharmaceuticalsOccupation (for Individual)
MS Exec Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : A2016-924799

Amount of Each Receipt this Period

36.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Spurr, Robert, A, ,

Mailing Address 608 Fifth Avenue

City
New YorkState
NYZip Code
10020FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis PharmaceuticalsOccupation (for Individual)
US Co Head & VP Patient Access & He

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : A2016-925290

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stevens, Donald, P, ,

Mailing Address One Health Plaza

City
East HanoverState
NJZip Code
07936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis PharmaceuticalsOccupation (for Individual)
Director State&External Affrs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

Transaction ID : A2016-924740

Amount of Each Receipt this Period

69.24

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

306.16

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

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

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

FOR LINE NUMBER: PAGE 31 OF 37
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Suter, Thomas, A, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Dir State & External Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925217

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Van Meter, Jennifer, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Pharmaceuticals

Occupation (for Individual)
Director Quality Ext Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925349

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Van Pelt, Jason, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Services Incorporated

Occupation (for Individual)
Exec Dir Fed Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

847.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-925323

Amount of Each Receipt this Period

154.00

☐ Memo Item

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

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

274.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 32 OF 37

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Warner, Robert, K, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Alcon Laboratories Inc.

Occupation (for Individual)

Global Franchise Head Vision Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924551

Amount of Each Receipt this Period

46.16

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Woolford, Stephen, A, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Novartis Services Incorporated

Occupation (for Individual)

Ex Dir Business Plang & Analy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : A2016-924927

Amount of Each Receipt this Period

46.16

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

92.32

6343.35

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 37

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kevin McCarthy for Congress

Mailing Address 213 Ashby Street

City
AlexandriaState
VAZip Code
22305Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

McCarthy, Kevin, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 23

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	6		

FEC Identification Number

C C00420935**Transaction ID : B600975**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cmte to Re-elect Linda Sanchez

Mailing Address 410 1st St. SE Suite 310

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Sanchez, Linda, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 38

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	6		

FEC Identification Number

C C00384057**Transaction ID : B600715**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Walters for Congress

Mailing Address P.O. Box 15239

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Walters, Mimi, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 45

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	6		

FEC Identification Number

C C00546853**Transaction ID : B600714**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 37

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Fearless PAC

Mailing Address 233 Pennsylvania Ave. SE 2nd Flr

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	6		

FEC Identification Number

C C00540955

Transaction ID : B600956

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Blue Hen PAC

Mailing Address P.O. Box 15293

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	6		

FEC Identification Number

C C00493700

Transaction ID : B600713

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Carper for Senate

Mailing Address 303 Massachusetts Ave. NE

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Carper, Tom, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: DE

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	6		

FEC Identification Number

C C00349217

Transaction ID : B600719

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 37

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hoyer for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2016

Mailing Address 499 S. Capitol St. SW Suite 406

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Hoyer, Steny, H, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: MD

District: 05

FEC Identification Number

C C00140715

Transaction ID : B600972

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Roy Blunt

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2016

Mailing Address 209 Pennsylvania Ave. SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Blunt, Roy, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: MO

District:

FEC Identification Number

C C00304758

Transaction ID : B602233

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Heidi for Senate

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2016

Mailing Address 420 C Street NE

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Heitkamp, Heidi, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: ND

District:

FEC Identification Number

C C00505552

Transaction ID : B600959

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 37

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael Burgess for Congress

Mailing Address P.O. Box 15239

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Burgess, Michael C., , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX

District: 26

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	6		

FEC Identification Number

C C00372532**Transaction ID : B600963**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Marc Veasey Campaign Cmte

Mailing Address PO Box 50084

City
Fort WorthState
TXZip Code
76105Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Veasey, Marc, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX

District: 33

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	6		

FEC Identification Number

C C00506832**Transaction ID : B600961**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. National Rep. Congressional Cmte

Mailing Address 320 1st St. SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Not Applicable

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	6		

FEC Identification Number

C C00075820**Transaction ID : B600957**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 37

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Republican Main Street Partnership PAC

Mailing Address 1220 L Street NW Suite 100-263

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Contribution

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	4			2	0	1	6		

FEC Identification Number

C C00165159

Transaction ID : B593251

Amount of Each Disbursement this Period

-5000.00

☐ Voted: Original check dated
☐ Memo Item 01/29/16

Full Name (Last, First, Middle Initial)

B. Republican Main Street Partnership PAC

Mailing Address 1300 Pennsylvania Ave. NW Box 190

City
WashingtonState
DCZip Code
20004Purpose of Disbursement
Contribution

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	5			2	0	1	6		

FEC Identification Number

C C00165159

Transaction ID : B602230

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

21500.00