

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Novartis Corporation Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="193839.62"/>	<input type="text" value="193839.62"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="115585.31"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="28441.84"/>	<input type="text" value="109972.68"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="144027.15"/>	<input type="text" value="303812.30"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="24045.24"/>	<input type="text" value="183830.39"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="119981.91"/>	<input type="text" value="119981.91"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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. 06/2004)

Write or Type Committee Name

Novartis Corporation Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11440.60	26429.74
(ii) Unitemized	17001.24	83542.94
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	28441.84	109972.68
(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)	28441.84	109972.68
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))..... ▶	28441.84	109972.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	28441.84	109972.68

DETAILED SUMMARY PAGE
of Disbursements

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	45.24	330.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	45.24	330.39
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24000.00	179500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	4000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	24045.24	183830.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24045.24	183830.39

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	28441.84	109972.68
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28441.84	109972.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	45.24	330.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	45.24	330.39

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 6 OF 40
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation AD IT Service Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **253.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : A2015-1148088

Amount of Each Receipt this Period
69.24

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Ex Dir Medical Services

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 / 29 / 2015

Transaction ID : A2015-1148428

Amount of Each Receipt this Period
150.00

C. Tracy L Baroni Allmon
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Exec Director Health Policy

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 / 29 / 2015

Transaction ID : A2015-1148439

Amount of Each Receipt this Period
180.00

SUBTOTAL of Receipts This Page (optional).....▶	399.24
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Troy L Borill		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID : A2015-1148190
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="59.52"/>
Name of Employer	Occupation	
Novartis Pharmaceuticals	Sr. Oncology Specialist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="214.55"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Michael D Brooks		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID : A2015-1147939
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="60.00"/>
Name of Employer	Occupation	
Novartis Pharmaceuticals	ASM II/Sr Oncol Area Sales Mgr	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Thomas R Brunner		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID : A2015-1148244
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="105.00"/>
Name of Employer	Occupation	
Novartis Pharmaceuticals	IT Expert 1	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="385.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="224.52"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Angela D Bylancik
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Ex Dir BD&L Alliance Mgmt
 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 / 29 / 2015
Transaction ID : A2015-1147907
 Amount of Each Receipt this Period
 150.00

B. Patricia A Cannon
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Director State Health Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : A2015-1148498
 Amount of Each Receipt this Period
 105.00

C. Daniel P Casserly
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Services Incorporated Occupation Head of Fed Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1523.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : A2015-1147951
 Amount of Each Receipt this Period
 415.38

SUBTOTAL of Receipts This Page (optional).....▶	670.38
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Cathryn M Clary			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : A2015-1148499
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="300.00"/>
Name of Employer	Occupation		
Novartis Pharmaceuticals	Head US Med & Chief Scien Offc		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1100.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Noelle L Cloud Dugan			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : A2015-1147741
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="150.00"/>
Name of Employer	Occupation		
Novartis Consumer Health Inc.	VP Global Policy OTC		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="550.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Julie A Collins			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : A2015-1147589
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="138.45"/>
Name of Employer	Occupation		
Alcon Laboratories Inc.	Director Digital Mktg		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="507.65"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="588.45"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A. Scott G Colpitts
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Head of Facilities & Utility Maint. (A)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **242.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : A2015-1148502

Amount of Each Receipt this Period
66.00

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Exe Dir Account Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **253.88**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : A2015-1147988

Amount of Each Receipt this Period
69.24

C. Joseph J Conoshenti
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Managed Care Marketing - Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : A2015-1148511

Amount of Each Receipt this Period
90.00

SUBTOTAL of Receipts This Page (optional).....▶	225.24
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 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

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

Mailing Address 350 Massachusetts Avenue

City Cambridge State MA Zip Code 02139

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

Name of Employer Sandoz Inc. Occupation Executive Director Oncology Injectable

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **507.65**

Date of Receipt **05 / 29 / 2015**
Transaction ID : A2015-1147772

Amount of Each Receipt this Period **138.45**

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Head Regulatory C&G TU

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **05 / 29 / 2015**
Transaction ID : A2015-1148403

Amount of Each Receipt this Period **60.00**

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation National Acct Scientific Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **05 / 29 / 2015**
Transaction ID : A2015-1148490

Amount of Each Receipt this Period **60.00**

SUBTOTAL of Receipts This Page (optional)..... **258.45**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 40
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. David R Epstein
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Services Incorporated Occupation Head Pharma AG

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **05 / 29 / 2015**

Transaction ID : A2015-1148056

Amount of Each Receipt this Period **100.00**

B. Leo A Farber
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Services Incorporated Occupation Exec Dir Fed Govt Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **05 / 29 / 2015**

Transaction ID : A2015-1148530

Amount of Each Receipt this Period **150.00**

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Head Med Acct Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **05 / 29 / 2015**

Transaction ID : A2015-1148123

Amount of Each Receipt this Period **150.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **400.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Head Advocacy & Ext Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **253.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : A2015-1148086

Amount of Each Receipt this Period
69.24

B. Neely T Frye
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation AD State & External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **685.71**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : A2015-1147999

Amount of Each Receipt this Period
189.27

C. Edward G Gajewski
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Exec Dir National & Regional Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : A2015-1147905

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional).....▶	318.51
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 40
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. James Gerace
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sandoz Inc. Occupation Oncology Portfolio Account Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : A2015-1147780
 Amount of Each Receipt this Period
 250.00

B. Lisa M Goldman
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation 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
 05 / 29 / 2015
Transaction ID : A2015-1148468
 Amount of Each Receipt this Period
 150.00

C. Erwin A Gomez Valladares
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Procurement-MGT GJFA 3
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 507.65

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : A2015-1147743
 Amount of Each Receipt this Period
 138.45

SUBTOTAL of Receipts This Page (optional)..... ▶ 538.45
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 16 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Nancy J Grande
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Head Proc Improv & Compliance IMS
 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 / 29 / 2015
Transaction ID : A2015-1148357
 Amount of Each Receipt this Period
 150.00

B. Kris Grzegorzewski
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Onco Ex Dir Clinical Res Phys
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : A2015-1148443
 Amount of Each Receipt this Period
 120.00

C. Joseph M Guidi
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Director Commercial Strategy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : A2015-1148425
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 40
<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 (Last, First, Middle Initial) A. David E Gulick		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID : A2015-1147862
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="90.00"/>
Name of Employer	Occupation	
Novartis Pharmaceuticals	Director Startegic Market Acc	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="330.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kurt Habel		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID : A2015-1148027
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="69.24"/>
Name of Employer	Occupation	
Novartis Pharmaceuticals	Asc Dir Incentive Modeling/Des	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="253.88"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sarah E Haller		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID : A2015-1147986
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="231.00"/>
Name of Employer	Occupation	
Novartis Services Incorporated	VP Intl Public Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="847.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="390.24"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 40
<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 (Last, First, Middle Initial) A. Kathy-Jo B Hayden		Date of Receipt MM / DD / YYYY 05 / 29 / 2015 Transaction ID : A2015-1148003
Mailing Address One Health Plaza		Amount of Each Receipt this Period 105.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation Director Public Health Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. Robert J Hilkert		Date of Receipt MM / DD / YYYY 05 / 29 / 2015 Transaction ID : A2015-1148392
Mailing Address One Health Plaza		Amount of Each Receipt this Period 69.24
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation Medical Unit Head Critcl Care	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.88	

Full Name (Last, First, Middle Initial) C. Cyrus M Hoseyni		Date of Receipt MM / DD / YYYY 05 / 29 / 2015 Transaction ID : A2015-1148454
Mailing Address One Health Plaza		Amount of Each Receipt this Period 300.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C		
Name of Employer Novartis Pharmaceuticals	Occupation Gbl Hd IIS and Advanced Quant. Science	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

SUBTOTAL of Receipts This Page (optional).....▶	474.24
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Charles F Hough
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Services Incorporated Occupation Head Strategy and Stakeholder Engageme

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015
Transaction ID : A2015-1148421

Amount of Each Receipt this Period
60.00

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Ex Director Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015
Transaction ID : A2015-1148472

Amount of Each Receipt this Period
150.00

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation IACH-Capability Bldg Academy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015
Transaction ID : A2015-1148063

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **260.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Sarah G Kan			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : A2015-1148515
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="195.00"/>
Name of Employer	Occupation		
Novartis Pharmaceuticals	Asc Dir State & Ext Affairs		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="631.49"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Thomas N Kendris			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : A2015-1147810
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="138.45"/>
Name of Employer	Occupation		
Novartis Pharmaceuticals	VPGeneral CounselINPCCountry		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="507.65"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Shannon T Klinger			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : A2015-1147773
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="115.38"/>
Name of Employer	Occupation		
Sandoz Inc.	Global Head Lgl & Gen Counsel		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="576.90"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="448.83"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial)
A. Richard E Knapp

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation ED State & External Affairs

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 / 29 / 2015

Transaction ID : A2015-1147918

Amount of Each Receipt this Period
346.14

Full Name (Last, First, Middle Initial)
B. Paul M Kotch

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Alcon Laboratories Inc. Occupation Dir Regional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : A2015-1147659

Amount of Each Receipt this Period
60.00

Full Name (Last, First, Middle Initial)
C. Robert W Kowalski

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation SVP Glb Hd DRA & Hd Glb Dev US

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **507.65**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : A2015-1148444

Amount of Each Receipt this Period
138.45

SUBTOTAL of Receipts This Page (optional).....▶	544.59
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Kathleen M Kulesher
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation 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 / 29 / 2015
Transaction ID : A2015-1148517
 Amount of Each Receipt this Period
75.00

B. Leigh Anne A Leas
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Exec Dir Public Health Policy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **590.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : A2015-1148345
 Amount of Each Receipt this Period
180.00

C. Richard E Lemire
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation Engineering - Facilities-MGT G
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **475.86**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : A2015-1147795
 Amount of Each Receipt this Period
129.78

SUBTOTAL of Receipts This Page (optional)..... **384.78**
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 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Lee C Lensky
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation ITTP LEAD SOLUTIONS ARCHITECT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015
Transaction ID : A2015-1148474

Amount of Each Receipt this Period
90.00

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Head US Oncology Mgd Markets & Mkt Acc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **507.65**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015
Transaction ID : A2015-1148422

Amount of Each Receipt this Period
138.45

C. Jeffrey W Lockwood
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer NIBRI Occupation Head NIBR Communications

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **253.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015
Transaction ID : A2015-1147748

Amount of Each Receipt this Period
69.24

SUBTOTAL of Receipts This Page (optional)..... ▶ **297.69**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. William R Matthews			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : A2015-1147993
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="67.23"/>
Name of Employer	Occupation		
Novartis Pharmaceuticals	Sr Oncol Area Sales Manager		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="241.69"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Catharine M McBride			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : A2015-1147935
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="150.00"/>
Name of Employer	Occupation		
Novartis Pharmaceuticals	AD State & External Affairs		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="523.05"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Edward D McGough			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : A2015-1147627
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="346.14"/>
Name of Employer	Occupation		
Alcon Laboratories Inc.	SVP Global Mfg & Tech Ops		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1269.18"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="563.37"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Brian J McNamara		Date of Receipt MM / DD / YYYY 05 / 29 / 2015 Transaction ID : A2015-1147738
Mailing Address One Health Plaza		Amount of Each Receipt this Period 138.45
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Novartis Consumer Health Inc.	
Occupation Division Head OTC		Aggregate Year-to-Date ▼ 507.65
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Gary J Menichini		Date of Receipt MM / DD / YYYY 05 / 29 / 2015 Transaction ID : A2015-1147587
Mailing Address One Health Plaza		Amount of Each Receipt this Period 75.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Alcon Laboratories Inc.	
Occupation VP/GM U.S. Pharmaceuticals		Aggregate Year-to-Date ▼ 275.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Susan J Millard		Date of Receipt MM / DD / YYYY 05 / 29 / 2015 Transaction ID : A2015-1147595
Mailing Address One Health Plaza		Amount of Each Receipt this Period 75.00
City East Hanover	State NJ	Zip Code 07936
FEC ID number of contributing federal political committee. C	Name of Employer Alcon Laboratories Inc.	
Occupation Head HR Alcon R&D		Aggregate Year-to-Date ▼ 275.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	288.45
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Donna H Myrie
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Associate Director Contracting

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 / 29 / 2015
Transaction ID : A2015-1148015

Amount of Each Receipt this Period
75.00

B. Vasant K Narasimhan
Full Name (Last, First, Middle Initial)

Mailing Address 350 Massachusetts Avenue

City Cambridge State MA Zip Code 02139

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

Name of Employer Novartis Pharmaceuticals Occupation IACH-Head Gbl Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.75**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015
Transaction ID : A2015-1148484

Amount of Each Receipt this Period
46.15

c. Hugh M O'Dowd
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation IAGB-CPO Head UK & Ireland

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **207.72**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015
Transaction ID : A2015-1147922

Amount of Each Receipt this Period
23.08

SUBTOTAL of Receipts This Page (optional)..... **144.23**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Shawn O'Neil
Full Name (Last, First, Middle Initial)

Mailing Address 608 Fifth Avenue

City New York State NY Zip Code 10020

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

Name of Employer Novartis Services Incorporated Occupation Ex Dir Legislative Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **605.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : A2015-1148461

Amount of Each Receipt this Period
165.00

B. Sharon N Olmstead
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation VP GL.Hd Reg Policy & Intelli

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **253.88**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : A2015-1148477

Amount of Each Receipt this Period
69.24

c. Craig S Osten
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Services Incorporated Occupation GSK PMO Finance Lead

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **253.88**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : A2015-1147815

Amount of Each Receipt this Period
69.24

SUBTOTAL of Receipts This Page (optional)..... ▶ **303.48**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Serafina Oxner			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : A2015-1148102
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="69.24"/>
Name of Employer	Occupation		
Novartis Pharmaceuticals	Ex Dir Healthcare Contract Adm		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="253.88"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. John M Pakulski			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : A2015-1147769
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="138.45"/>
Name of Employer	Occupation		
Sandoz Inc.	Exec Director Regulatory Affai		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="507.65"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Bin Peng			Date of Receipt
Mailing Address One Health Plaza			<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : A2015-1148445
East Hanover	NJ	07936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
Information Requested	Clinical Research (M.D.)-MGT G		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="257.69"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Candice C Phipps		Date of Receipt
Mailing Address One Health Plaza		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code
East Hanover	NJ	07936
FEC ID number of contributing federal political committee.		Transaction ID : A2015-1147777
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>
Name of Employer	Occupation	
Sandoz Inc.	Director Government Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1100.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Elizabeth Power		Date of Receipt
Mailing Address 350 Massachusetts Avenue		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code
Cambridge	MA	02139
FEC ID number of contributing federal political committee.		Transaction ID : A2015-1148486
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="90.00"/>
Name of Employer	Occupation	
Novartis Services Incorporated	Dir. Global Media Relations	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="330.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Marc B Reuss		Date of Receipt
Mailing Address 350 Massachusetts Avenue		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code
Cambridge	MA	02139
FEC ID number of contributing federal political committee.		Transaction ID : A2015-1147776
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
Sandoz Inc.	IADE-Head HR Sandoz	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="440.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation VPPA NPCCountry PA Head

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 / 29 / 2015
Transaction ID : A2015-1148067

Amount of Each Receipt this Period
346.14

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Head Digital Strategy And Svc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015
Transaction ID : A2015-1148479

Amount of Each Receipt this Period
90.00

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Business Relationship Mgr.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **355.41**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015
Transaction ID : A2015-1147841

Amount of Each Receipt this Period
96.93

SUBTOTAL of Receipts This Page (optional)..... **533.07**

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 31 OF 40
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Therapeutic Area Head

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 / 29 / 2015

Transaction ID : A2015-1148495

Amount of Each Receipt this Period
150.00

B. Harry J Sacks
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation VP Medl & Scientific Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : A2015-1148501

Amount of Each Receipt this Period
60.00

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Ex 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 / 29 / 2015

Transaction ID : A2015-1148522

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... **285.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Mark G Schweitzer
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Services Incorporated Occupation Gbl Head Analytical Science &Technology
 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 / 29 / 2015
Transaction ID : A2015-1148529
 Amount of Each Receipt this Period
150.00

B. Christi L Shaw
 Full Name (Last, First, Middle Initial)
 Mailing Address 44 Guinea Hollow Rd
 City Lebanon State NJ Zip Code 08833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation US Country President & President NPC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **660.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015
Transaction ID : A2015-1148462
 Amount of Each Receipt this Period
180.00

C. Joseph M Simon
 Full Name (Last, First, Middle Initial)
 Mailing Address One Health Plaza
 City East Hanover State NJ Zip Code 07936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Novartis Pharmaceuticals Occupation MS Exec Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **203.06**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015
Transaction ID : A2015-1147943
 Amount of Each Receipt this Period
55.38

SUBTOTAL of Receipts This Page (optional).....	385.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 608 Fifth Avenue

City New York State NY Zip Code 10020

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

Name of Employer Novartis Pharmaceuticals Occupation Head Mgd Mkts/Mkt Acs/Est Med

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 / 29 / 2015

Transaction ID : A2015-1148503

Amount of Each Receipt this Period
300.00

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation 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 / 29 / 2015

Transaction ID : A2015-1147881

Amount of Each Receipt this Period
103.86

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Sandoz Inc. Occupation Exec Dir Government Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **253.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : A2015-1147768

Amount of Each Receipt this Period
69.24

SUBTOTAL of Receipts This Page (optional).....▶	473.10
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 34 OF 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A. John Suchorsky
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Demand Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
253.88

Date of Receipt
05 / 29 / 2015
Transaction ID : A2015-1148064

Amount of Each Receipt this Period
69.24

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Dir State & External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
281.56

Date of Receipt
05 / 29 / 2015
Transaction ID : A2015-1148426

Amount of Each Receipt this Period
90.00

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Director Regional Project Eng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
253.88

Date of Receipt
05 / 29 / 2015
Transaction ID : A2015-1148115

Amount of Each Receipt this Period
69.24

SUBTOTAL of Receipts This Page (optional)..... ▶ 228.48

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation SENIOR KEY ACCOUNT MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **354.80**

Date of Receipt **05 / 29 / 2015**

Transaction ID : A2015-1148142

Amount of Each Receipt this Period **97.83**

B. Jason Van Pelt
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Services Incorporated Occupation Exec Dir Fed Govt Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **539.00**

Date of Receipt **05 / 29 / 2015**

Transaction ID : A2015-1148531

Amount of Each Receipt this Period **231.00**

C. Matthew M von Wellsheim
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Alcon Laboratories Inc. Occupation VP IT & CIO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **253.88**

Date of Receipt **05 / 29 / 2015**

Transaction ID : A2015-1147630

Amount of Each Receipt this Period **69.24**

SUBTOTAL of Receipts This Page (optional)..... **398.07**

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 36 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Alcon Laboratories Inc. Occupation Head US & Canada

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **253.88**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 29 / 2015

Transaction ID : A2015-1147636

Amount of Each Receipt this Period
69.24

B. Stephen A Woolford
Full Name (Last, First, Middle Initial)

Mailing Address One Health Plaza

City East Hanover State NJ Zip Code 07936

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

Name of Employer Novartis Pharmaceuticals Occupation Ex 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
05 / 29 / 2015

Transaction ID : A2015-1148100

Amount of Each Receipt this Period
69.24

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	138.48
TOTAL This Period (last page this line number only).....▶	11440.60

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Capital One Bank

Mailing Address 701 Pennsylvania Ave. NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Bank Service Charge

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

/ /

Transaction ID : B576046

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Majority Committee PAC--MC PAC

Mailing Address P.O. Box 10134

City Bakersfield State CA Zip Code 93389

Purpose of Disbursement Contribution

011

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2015

Transaction ID : B574578

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Dr. Raul Ruiz for Congress Cmte

Mailing Address PO Box 3433

City Palm Desert State CA Zip Code 92261

Purpose of Disbursement Contribution

011

Candidate Name

Raul Ruiz MD

Category/Type

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 36

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2015

Transaction ID : B574582

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Project West Political Action Cmte

Mailing Address 1020 N. Fairfax Street Suite 201

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Contribution

011

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2015

Transaction ID : B574575

Amount of Each Disbursement this Period

5000.00

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

11000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Continuing America's Strength and Security PAC

Date of Disbursement

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

Mailing Address P.O. Box 14331

Transaction ID : B574577

City State Zip Code
Baton Rouge LA 70898

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Purpose of Disbursement
Contribution

0	1	1
Category/ Type		

Candidate Name

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Full Name (Last, First, Middle Initial)

B. George Holding for Congress

Date of Disbursement

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

Mailing Address 217 Third Street SE

Transaction ID : B574576

City State Zip Code
Washington DC 20003

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

Purpose of Disbursement
Contribution

0	1	1
Category/ Type		

Candidate Name

George Holding

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NC District: 13

Full Name (Last, First, Middle Initial)

C. Lance for Congress

Date of Disbursement

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

Mailing Address 38 Lakewood Drive

Transaction ID : B574581

City State Zip Code
Denville NJ 07834

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Purpose of Disbursement
Contribution

0	1	1
Category/ Type		

Candidate Name

Leonard Lance

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NJ District: 07

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

6	0	0	0	.	0	0
---	---	---	---	---	---	---

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

6	0	0	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pallone for Congress

Mailing Address PO Box 3176

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement Contribution

011

Candidate Name

Frank Pallone Jr.

Category/Type

Office Sought: House Senate President
State: NJ District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2015

Transaction ID : B574579

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. IMPACT

Mailing Address 220 I Street NE Suite 250

City Washington State DC Zip Code 20002

Purpose of Disbursement Contribution

011

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼ Not Applicable

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2015

Transaction ID : B574580

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Wyden for Senate

Mailing Address 3612 Newark Street NW

City Washington State DC Zip Code 20016

Purpose of Disbursement Contribution

011

Candidate Name

Ron Wyden

Category/Type

Office Sought: House Senate President
State: OR District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2015

Transaction ID : B574583

Amount of Each Disbursement this Period

1000.00

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

7000.00

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

24000.00