| FEC FORM 3X | AN | PORT O | JRSEM | ENTS | ee | | Office Use Only | |
|--|--|---|----------------------|---------------------------------|---------------------|----------------------|--------------------------|---------------|
| 1. NAME OF COMMITTEE (in fi | | FEC MAILING LA | | ample:If typing er the lines | , type | | | |
| | n Political Action | n Committee | | | | | | |
| ADDRESS (number and | street) | 01 Pennsylvania Av | re. NW Suite 7 | 25 | | | | |
| Check if differ than previousl reported. (AC | y iw | /ashington | | | | | 20004 | 2608 |
| 2. FEC IDENTIFICAT | ION NUMBER | ▼ | CITY 🛦 | | S | STATE | ZIPCOL | DE 🔺 |
| C00033969 | |] | 3. IS THIS REPORT | | NEW N) OR | AMI (A) | ENDED | |
| July 15 Quarterly October Quarterly January 3 Quarterly July 31 M Report(N Year Onl | orts: Report(Q1) Report(Q2) 15 Report(Q3) 31 Report(YE) Nid-Year on-election | b) Monthly Report Due On: (c) 12-Day PRE -Elect Report for (d) 30-Day Post -Elec Report for | the: |) | 12C) | Sep 2 | 2G) in the State o | Special (30S) |
| Covering Period I certify that I have exam Type or Print Name of T Signature of Treasurer | | Dan P. Casserly | | through and belief it is | | 3 1 and complete. | 2009 | 2009 |
| NOTE : Submission of | alse, erroneous | or incomplete info | rmation may e | ibject the pers | | | penalties of 211 s | S.C. 437a |
| Office Use Only | | | | | | | FEC FOR (Rev. 12/200 | M 3X |

| Image# | 29991 | 985760 |
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SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

| _ | | | | | |
|-----|-------|--|---------------------------|--------------------------|-----------------|
| ١ | | or Type Committee Name vartis Corporation Political Action | Committee | | |
| F | Repor | t Covering the Period: From: | M M 0 3 0 1 Y Y W 2 0 0 9 | | Y Y Y Y 2009 |
| | | | COLUMN A This Period | A COLUM Calendar Year | |
| 6. | (a) | Cash on Hand January 1 Ž009 ^Y ^Y | | 13 | 38871.31 |
| | (b) | Cash on Hand at Begining of Reporting Period | 114606 | 3.68 | |
| | (c) | Total Receipts (from Line 19) | 26352 | 2.46 | 77937.83 |
| | (d) | Subtotal (add lines 6(b) and | | | |
| | | 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 140959 |).14 2 ⁻ | 16809.14 |
| 7. | Tota | al Disbursements (from Line 31) | 61800 |).00 13 | 37650.00 |
| 8. | Cas | h on Hand at Close of | | | |
| | | orting Period ptract Line 7 from Line 6(d)) | 79159 |).14 | 79159.14 |
| 9. | Deb | ts and Obligations owed TO | | | |
| | | committee (Itemize all on edule C and/or Schedule D) | C | 0.00 | |
| 10. | the | ts and Obligations owed BY committee (Itemize all on edule C and/or Schedule D) | C | 0.00 | |

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

For further information contact:

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

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

FE6AN026

| FEC Form 3X (Rev. 06/2004) | OF RECEIPTS | Page 3 |
|---|-------------------------------|-----------------------------------|
| Write or Type Committee Name Novartis Corporation Political Action Com | mittee | |
| | | |
| Report Covering the Period: From: | 01 2000 | |
| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
| 1. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) | 5776.28 | 10674.96 |
| | 20576.18 | 67262.87 |
| (ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii) | 26352.46 | 77937.83 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 26352.46 | 77937.83 |
| 2. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 3. All Loans Received | 0.00 | 0.00 |
| Loan Repayments Received Offsets To Operating Expenditures | 0.00 | 0.00 |
| (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 8. 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 Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 26352.46 | 77937.83 |
| 0. Total Federal Receipts (subtract Line 18(c) from Line 19) | 26352.46 | 77937.83 |

DETAILED SUMMARY PAGE

Image# 29991985761

Image# 29991985762

DETAILED SUMMARY PAGE

| | Total This Period | Calendar Year-to-Date |
|--|-------------------|-----------------------|
| Operating Expenditures: (a) Shared Federal/Non-Federal | | |
| (a) Shared 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 | 0.00 | 100.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) | 0.00 | 100.00 |
| 2. Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 |
| Contributions to Federal Candidates/Committees and Other Political Committees | 60000.00 | 135000.00 |
| Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | 0.00 | 0.00 |
| 6. Loan Repayments Made | 0.00 | 0.00 |
| 7. Loans Made | 0.00 | 0.00 |
| 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 |
| 9. Other Disbursements | 1800.00 | 2550.00 |
| D. Federal Election Activity (2 U.S.C 431(20)) (a) Shared 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 |
| Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 61800.00 | 137650.00 |
| 2. Total Federal Disbursements | | |
| (subtract Line 21(a)(ii) and Line 30(a)(ii) | | |

Image# 29991985763

DETAILED SUMMARY PAGE

| | 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) | 26352.46 | 77937.83 | |
| 34. | Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 | |
| 35. | Net Contributions (other than loans) (subtract Line 34 from Line 33) | 26352.46 | 77937.83 | |
| 36. | Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 100.00 | |
| 37. | Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 | |
| 38. | Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 100.00 | |

FE6AN026

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | () | FOR LINE NUMBER: PAGE 6/26 (check only one) X X 11a 11b 11c | | |
|---|---|------------------------------------|---|---|--|
| A | ny information copied from such Reports an for commercial purposes, other than using | d Statements ma the name and ad | Detailed Summary Page y not be sold or used by any perso dress of any political committee to | 13 14 15 16 17 on for the purpose of soliciting contributions o solicit contributions from such committee. | |
| | NAME OF COMMITTEE (In Full) Novartis Corporation Political Action | | | | |
| ∠ 4. | Full Name (Last, First, Middle Initial) Michael Beck | Date of Receipt | | | |
| | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y 03 20 2009 | |
| | City | State | Zip Code | Transaction ID: A2009-2832821 | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | C | | 75.00 | |
| | Name of Employer Novartis Pharmaceuticals | Occupatio Executiv | | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | _] | |
| | Primary General Other (specify) ▼ | 0 0 | 225.00 |] | |
| . — | Full Name (Last, First, Middle Initial) Rainer Boehm | | | Date of Receipt | |
| | Mailing Address One Health Plaza | | | M M / D D / Y | |
| | City | State | Zip Code | Transaction ID: A2009-2832585 | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | C | | 150.00 | |
| | Name of Employer Novartis Pharmaceuticals | Occupatio Executiv | | | |
| | Receipt For: Primary General | Aggregate | e Year-to-Date 🔻 | _ | |
| | Other (specify) v | 0 0 | 450.00 | | |
| | Full Name (Last, First, Middle Initial) Catherine T Burton | | | Date of Receipt | |
| | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y Y 03 20 2009 2009 10000 | |
| | City East Hanover | State NJ | Zip Code 07936 | Transaction ID: A2009-2832802 Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | C | | 189.70 | |
| | Name of Employer Novartis Pharmaceuticals | Occupatio Executiv | | | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date 559.84 |] | |
| | | | | | |

| | SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 7 / 26 (check only one) | |
|----|--|-----------------------|-------------------------------------|--|--|
| | ITEMIZED RECEIPTS | | for each category of the | X 11a 11b 11c 12 | |
| | | | Detailed Summary Page | | |
| | Any information copied from such Reports and | Statements ma | v not be sold or used by any perse | | |
| | or for commercial purposes, other than using th | e name and ad | dress of any political committee to | o solicit contributions from such committee. | |
| | NAME OF COMMITTEE (In Full) | | | | |
| | Novartis Corporation Political Action | Committee | | | |
| Α. | Full Name (Last, First, Middle Initial) Ronald M Califre | Date of Receipt | | | |
| | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y 03 20 2009 | |
| | City | State | Zip Code | Transaction ID: A2009-2832590 | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | C | | 416.00 | |
| | Name of Employer Novartis Pharmaceuticals | Occupatio | | _ | |
| | | Executiv | | | |
| | Receipt For: Primary General | Aggregate | e Year-to-Date | _ | |
| | Other (specify) ▼ | | 1248.00 | | |
| В. | Full Name (Last, First, Middle Initial) James P Carey | | | Date of Receipt | |
| | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y 03 20 2009 | |
| | City | State | Zip Code | Transaction ID: A2009-2832813 | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | C | | 80.06 | |
| | Name of Employer Novartis Pharmaceuticals | Occupatio Executiv | | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | | |
| | Primary General Other (specify) ▼ | | 232.56 |] | |
| C. | Full Name (Last, First, Middle Initial) Daniel P Casserly | 1 | | Date of Receipt | |
| 0. | Mailing Address One Health Plaza | | | | |
| | | | | 03 20 2009 | |
| | City | State | Zip Code | Transaction ID: A2009-2832311 | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | C | | 200.00 | |
| | Name of Employer Novartis Services Incorpo- rated | Occupatio Executiv | | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | | |
| | Primary General Other (specify) The second | 0 0 | 600.00 |] | |
| | SUBTOTAL of Receipts This Page (optional) . | 1 | | 696.06 | |
| | OUDIVIAL OFFICEIPIS THIS Faye (optional). | | | | |
| | TOTAL This Period (last page this line numbe | r only) | N | | |
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| | | | | FOR LINE NUMBER: PAGE 8/26 |
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| | SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | (check only one) |
| | ITEMIZED RECEIPTS | | for each category of the Detailed Summary Page | X 11a 11b 11c 12 |
| | | | Betalled Gummary Page | 13 14 15 16 17 |
| | Any information copied from such Reports and S or for commercial purposes, other than using the | Statements ma e name and ad | ay not be sold or used by any pers Idress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) | | | |
| | Novartis Corporation Political Action (| | | |
| Α. | Full Name (Last, First, Middle Initial) Steven J Catalano | Date of Receipt | | |
| | Mailing Address One Health Plaza | | | M M / D D / Y |
| | City | State | Zip Code | Transaction ID: A2009-2832843 |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 86.67 |
| | Name of Employer Novartis Pharmaceuticals | Occupation Executiv | | _ |
| | Receipt For: | 1 | e Year-to-Date 🔻 | |
| | Primary General | | 260.01 | |
| | Other (specify) | 0 0 | 200.01 | |
| в. | Full Name (Last, First, Middle Initial) Candace B Dibblee | • | | Date of Receipt |
| | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y 03 20 2009 |
| | City | State | Zip Code | Transaction ID: A2009-2832692 |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 250.00 |
| | Name of Employer Novartis Services Incorpo- rated | Occupation Executiv | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | |
| | Primary General Other (specify) ▼ | | 578.29 |] |
| C. | Full Name (Last, First, Middle Initial) David P Drake | 1 | | Date of Receipt |
| | Mailing Address One Health Plaza | | | 03 20 Y Y Y Y Y 2009 |
| | City | State | Zip Code | Transaction ID: A2009-2832514 |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 250.00 |
| | Name of Employer Novartis Services Incorpo- rated | Occupatio Executiv | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | |
| | Primary General Other (specify) ▼ | | 591.88 |] |
| | | I | | 586.67 |
| | SUBTOTAL of Receipts This Page (optional) | | | |
| | TOTAL This Period (last page this line number | only) | | |
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| | SCHEDULE A (FEC Form 3X) | | | FOR LINE NUMBER: PAGE 9/26 | | | |
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| | | | Use separate schedule(s) for each category of the | (check only one) | | | |
| | ITEMIZED RECEIPTS | | Detailed Summary Page | X 11a 11b 11c 12 | | | |
| [| Any information copied from such Reports and or for commercial purposes, other than using th | Statements ma | Ay not be sold or used by any pers dress of any political committee to | 13 14 15 16 17 on for the purpose of soliciting contributions o solicit contributions from such committee. | | | |
| | | | | | | | |
| | Novartis Corporation Political Action | | | | | | |
| A. | , Full Name (Last, First, Middle Initial) James R Elkin | Date of Receipt | | | | | |
| | Mailing Address One Health Plaza | Mailing Address One Health Plaza | | | | | |
| | City | State | Zip Code | Transaction ID: A2009-2832021 | | | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | C | | 416.00 | | | |
| | Name of Employer Novartis Services Incorpo- rated | Occupatio Executiv | | _ | | | |
| | Receipt For: | | e Year-to-Date 🔻 | | | | |
| | Primary General Other (specify) ▼ | | 1248.00 | 1 | | | |
| - | Full Name (Last, First, Middle Initial) | | | | | | |
| В. | David R Epstein | | | Date of Receipt | | | |
| | Mailing Address One Health Plaza | | M M / D D / Y | | | | |
| | City | State | Zip Code | Transaction ID: A2009-2832569 | | | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | C | | 100.00 | | | |
| | Name of Employer Novartis Pharmaceuticals | Occupation Executiv | | | | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | | | | |
| | Primary General Other (specify) ▼ | | 300.00 |] | | | |
| - C. | Full Name (Last, First, Middle Initial) Christopher Esposito | | | Date of Receipt | | | |
| | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y 03 20 2009 | | | |
| | City | State | Zip Code | Transaction ID: A2009-2832848 | | | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | C | | 75.00 | | | |
| | Name of Employer Occupatio Novartis Pharmaceuticals Executive | | | | | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | _ | | | |
| | Other (specify) | | 225.00 |] | | | |
| [| SUBTOTAL of Receipts This Page (optional) . | | | 591.00 | | | |
| ┝ | SUBTUTAL OF DECEMPTS THIS Mage (optional). | | | | | | |
| | TOTAL This Period (last page this line numbe | r only) | | | | | |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | | | FOR LINE NUMBER: PAGE 10 / 26 (check only one) X X 11a 11b 11c | | |
|---|--|------------------------------------|------------------------------------|---|--|--|
| A | Any information copied from such Reports an r for commercial purposes, other than using | d Statements ma the name and ad | y not be sold or used by any perso | 13 14 15 16 17 on for the purpose of soliciting contributions o solicit contributions from such committee. | | |
| | NAME OF COMMITTEE (In Full) Novartis Corporation Political Action | n Committee | | | | |
| ∠ ۹. | Full Name (Last, First, Middle Initial) Neely T Frye | Date of Receipt | | | | |
| | Mailing Address One Health Plaza | | | 03 20 Y Y Y Y 03 20 2009 | | |
| | City | State | Zip Code | Transaction ID: A2009-2832460 | | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 119.03 | | |
| | Name of Employer Novartis Pharmaceuticals | Occupatio Executiv | | | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | | | |
| | Other (specify) | 0 0 | 349.05 | | | |
| | Full Name (Last, First, Middle Initial) Thomas E Giles | | | Date of Receipt | | |
| | Mailing Address One Health Plaza | | | M M M / D D / Y Y Y Y Y 03 / 20 / 2009 | | |
| | City | State | Zip Code | Transaction ID: A2009-2832613 | | |
| | East Hanover FEC ID number of contributing federal political committee. | NJ C | 07936 | Amount of Each Receipt this Period 175.00 | | |
| | Name of Employer Novartis Services Incorpo- rated | Occupatio Executiv | | | | |
| | Receipt For: Primary General Other (specify) ▼ | | e Year-to-Date V 525.00 |] | | |
| | Full Name (Last, First, Middle Initial) Robert Gines | | | Date of Receipt | | |
| | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y 0 3 2 0 2 0 9 | | |
| | City East Hanover | State NJ | Zip Code 07936 | Transaction ID: A2009-2832280 Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 100.00 | | |
| | Name of Employer Novartis Services Incorpo- rated | Occupatio Executiv | e | | | |
| | Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date 🔻 300.00 |] | | |
| | SUBTOTAL of Receipts This Page (optional | | ` | 394.03 | | |

| | SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 11/26 | | | | |
|----|--|---|---|---|--|--|--|--|
| | ITEMIZED RECEIPTS | · · · · · | | (check only one) | | | | |
| | ITEMIZED RECEIPTS | | for each category of the Detailed Summary Page | X 11a 11b 11c 12 | | | | |
| | Any information copied from such Reports and | Statements ma | v not be sold or used by any persi | 13 14 15 16 17 on for the purpose of soliciting contributions | | | | |
| | or for commercial purposes, other than using th | r for commercial purposes, other than using the name and address of any political committee | | | | | | |
| | NAME OF COMMITTEE (In Full) | | | | | | | |
| | Novartis Corporation Political Action | Committee | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Mark D Grebenau | Date of Receipt | | | | | | |
| | Mailing Address One Health Plaza | | | M · M / D · D / Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y · Y · Y · Y Y · Y · Y · Y Y · Y · Y · Y Y · Y · Y · Y · Y Y · Y · Y · Y · Y · Y · Y Y · Y · Y · Y · Y · Y · Y · Y · Y · Y · | | | | |
| | City | State | Zip Code | Transaction ID: A2009-2832844 | | | | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing federal political committee. | C | | 159.90 | | | | |
| | Name of Employer Novartis Pharmaceuticals | Occupatio Executiv | | | | | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | | | | | |
| | Primary General Other (specify) ▼ | | 470.38 | | | | | |
| | | 0.0 | 0 0 0 0 0 0 0 0 | 1 | | | | |
| в. | Full Name (Last, First, Middle Initial) Sheldon Jones | · | | Date of Receipt | | | | |
| | Mailing Address One Health Plaza | | | M · M / D · D / Y · Y · Y · Y Y Y · Y · Y · Y Y | | | | |
| | City | State | Zip Code | Transaction ID: A2009-2832003 | | | | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing federal political committee. | C | | 79.97 | | | | |
| | Name of Employer Novartis Finance Corporat- ion | Occupatio Executiv | | | | | | |
| | Receipt For: | Aggregati | | | | | | |
| | Primary General Other (specify) | | 233.75 |] | | | | |
| C. | Full Name (Last, First, Middle Initial) Richard E Knapp | | | Date of Receipt | | | | |
| • | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y 03 20 2009 | | | | |
| | City | State | Zip Code | Transaction ID: A2009-2832213 | | | | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing federal political committee. | C | | 200.00 | | | | |
| | Name of Employer Novartis Pharmaceuticals | Occupatio Executiv | | | | | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | _ | | | | |
| | Primary General Other (specify) ▼ | | 600.00 |] | | | | |
| | SUBTOTAL of Receipts This Page (optional). | 1 | | 439.87 | | | | |
| | SUBTUTAL OF DECEIPTS THIS Page (optional) | | | | | | | |
| | TOTAL This Period (last page this line numbe | r only) | | · · · · · · · · · · · · · · · · · · · | | | | |

| | SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Statemente ma | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 12 / 26 (check only one) 11a 11b 11c 12 13 14 15 16 17 |
|----|---|------------------------|---|--|
| | or for commercial purposes, other than using the | e name and ad | dress of any political committee to | solicit contributions from such committee. |
| | | | | |
| | Novartis Corporation Political Action C | Committee | | |
| Α. | Full Name (Last, First, Middle Initial) Richard E Lemire | | | Date of Receipt |
| | Mailing Address One Health Plaza | | | 03 / ^D D / Y Y Y Y 2009 |
| | City | State | Zip Code | Transaction ID: A2009-2831820 |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 83.72 |
| | Name of Employer Novartis Pharma Suffern | Occupatio Executive | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | _ |
| | Primary General Other (specify) ▼ | 0 0 | 244.72 |] |
| в. | Full Name (Last, First, Middle Initial) Lon D Lowrey | | | Date of Receipt |
| | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y 03 20 2009 |
| | City | State | Zip Code | Transaction ID: A2009-2831992 |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 125.00 |
| | Name of Employer Novartis Pharmaceuticals | Occupatio Executiv | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | |
| | Other (specify) | 0 0 | 375.00 |] |
| C. | Full Name (Last, First, Middle Initial) Brenda Luckritz | I | | Date of Receipt |
| | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y 03 20 2009 |
| | City | State | Zip Code | Transaction ID: A2009-2832018 |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 416.00 |
| | Name of Employer Novartis Services Incorpo- | Occupatio Executiv | | |
| | rated Receipt For: | | e Year-to-Date 🔻 | _ |
| | Primary General Other (specify) ▼ | | 1248.00 |] |
| | SUBTOTAL of Receipts This Page (optional) | | | 624.72 |
| | TOTAL This Period (last page this line number | only) | Þ | |

| | | | | FOR LINE NUMBER: PAGE 13/26 | | | | | | | | | |
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| | SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | (check only one) | | | | | | | | | |
| | ITEMIZED RECEIPTS | | for each category of the | | | | | | | | | | |
| | | | Detailed Summary Page | X 11a 11b 11c 12 | | | | | | | | | |
| | | | | 13 14 15 16 17 | | | | | | | | | |
| | Any information copied from such Reports and St or for commercial purposes, other than using the | tatements ma name and ad | y not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. | | | | | | | | | |
| | NAME OF COMMITTEE (In Full) | | | | | | | | | | | | |
| | Novartis Corporation Political Action C | ommittee | | | | | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Mary L Manning | | | Date of Receipt | | | | | | | | | |
| | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y 03 20 2009 | | | | | | | | | |
| | City | State | Zip Code | Transaction ID: A2009-2832894 | | | | | | | | | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | | | | | | | | | |
| | | | | | | | | | | | | | |
| | FEC ID number of contributing federal political committee. | C | | 83.33 | | | | | | | | | |
| | Name of Employer Novartis Pharmaceuticals | Occupation Executiv | | | | | | | | | | | |
| | Receipt For: | | e Year-to-Date 🔻 | | | | | | | | | | |
| | Primary General | Aggregat | | | | | | | | | | | |
| | Other (specify) | | 249.99 | | | | | | | | | | |
| | | | | | | | | | | | | | |
| в. | Full Name (Last, First, Middle Initial) William D Mc Laury | | | Date of Receipt | | | | | | | | | |
| | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y 03 20 2009 | | | | | | | | | |
| | City | State | Zip Code | Transaction ID: A2009-2832312 | | | | | | | | | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | | | | | | | | | |
| | | | | | | | | | | | | | |
| | FEC ID number of contributing federal political committee. | C | | 100.00 | | | | | | | | | |
| | Name of Employer Novartis Pharmaceuticals | Occupatio | n | - | | | | | | | | | |
| | Novartis Pharmaceuticals | Executiv | e | | | | | | | | | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | | | | | | | | | | |
| | Primary General | | | | | | | | | | | | |
| | Other (specify) | 0 0 | 300.00 | | | | | | | | | | |
| C. | Full Name (Last, First, Middle Initial) Catharine M McGeehan | | | Date of Receipt | | | | | | | | | |
| | Mailing Address One Health Plaza | | | 03 20 2009 | | | | | | | | | |
| | City | State | Zip Code | Transaction ID: A2009-2832254 | | | | | | | | | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | | | | | | | | | |
| | FEC ID number of contributing | | | | | | | | | | | | |
| | federal political committee. | C | | 75.00 | | | | | | | | | |
| | Name of Employer Novartis Pharmaceuticals | Occupation Executiv | | 1 | | | | | | | | | |
| | Receipt For: | | e Year-to-Date 🔻 | -1 | | | | | | | | | |
| | Primary General | Aggregate | | | | | | | | | | | |
| | Other (specify) ▼ | 0 0 | 225.00 | | | | | | | | | | |
| | SUBTOTAL of Receipts This Page (optional) | | | 258.33 | | | | | | | | | |
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| | TOTAL This Period (last page this line number of | only) | ····· | | | | | | | | | | |

| | SCHEDULE A (FEC Form 3X) | Γ | Use separate schedule(s) | FOR LINE NUMBER: PAGE 14/26 |
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| | ITEMIZED RECEIPTS | | for each category of the | (check only one) |
| | | | Detailed Summary Page | $\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$ |
| | Any information copied from such Reports and S or for commercial purposes, other than using the | Statements may e name and add | not be sold or used by any person ress of any political committee to | on for the purpose of soliciting contributions |
| | NAME OF COMMITTEE (In Full) | | | |
| | Novartis Corporation Political Action C | Committee | | |
| Α. | Full Name (Last, First, Middle Initial) Brian J McNamara | | | Date of Receipt |
| | Mailing Address One Health Plaza | | | 03 / D D / Y Y Y Y 03 / 31 / 2009 |
| | City | State | Zip Code | Transaction ID: A2009-2938006 |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 100.00 |
| | Name of Employer Novartis Consumer Health Inc. | Occupation Sr. Vice P | President OTC | - |
| | Receipt For: | Aggregate | Year-to-Date 🔻 | |
| | Other (specify) | 0 0 | 500.00 |] |
| в. | Full Name (Last, First, Middle Initial) Wayne P Merkelson | | | Date of Receipt |
| | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y 03 20 2009 |
| | City | State | Zip Code | Transaction ID: A2009-2832618 |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 75.00 |
| | Name of Employer Novartis Finance Corporat- ion | Occupation Executive | | |
| | Receipt For: | Aggregate | Year-to-Date 🔻 | |
| | Other (specify) | 0 0 | 225.00 |] |
| C. | Full Name (Last, First, Middle Initial) Glenn H Morton | | | Date of Receipt |
| | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y 03 20 2009 |
| | City | State | Zip Code | Transaction ID: A2009-2832487 |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 151.54 |
| | Name of Employer Novartis Pharmaceuticals | Occupation Executive | | |
| | Receipt For: | Aggregate | Year-to-Date 🔻 | |
| | Primary General Other (specify) ▼ | | 444.38 | |
| | SUBTOTAL of Receipts This Page (optional) | | | 326.54 |
| | TOTAL This Period (last page this line number | only) | | |

| | SCHEDULE A (FEC Form 3X) | | | FOR LINE NUMBER: PAGE 15/26 | | | | | | | | | | |
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| | ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the | (check only one) | | | | | | | | | | |
| | ITEMIZED RECEIPTS | | Detailed Summary Page | X 11a 11b 11c 12 | | | | | | | | | | |
| [| Any information copied from such Reports and or for commercial purposes, other than using th | Statements may | y not be sold or used by any perso dress of any political committee to | 13 14 15 16 17 In for the purpose of soliciting contributions solicit contributions from such committee. | | | | | | | | | | |
| | NAME OF COMMITTEE (In Full) | | ····· | | | | | | | | | | | |
| | Novartis Corporation Political Action | Committee | | | | | | | | | | | | |
| A. | , Full Name (Last, First, Middle Initial) Marion T Morton | | | Date of Receipt | | | | | | | | | | |
| | Mailing Address One Health Plaza | | | M · M / D · D / Y · Y · Y · Y Y 0 3 2 0 2 0 0 9 2 0 0 9 | | | | | | | | | | |
| | City | State | Zip Code | Transaction ID: A2009-2832601 | | | | | | | | | | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | | | | | | | | | | |
| | FEC ID number of contributing federal political committee. | C | | 100.00 | | | | | | | | | | |
| | Name of Employer Novartis Pharmaceuticals | Occupatio Executiv | | | | | | | | | | | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | | | | | | | | | | | |
| | Primary General Other (specify) ▼ | 0 0 | 300.00 |] | | | | | | | | | | |
| - B. | Full Name (Last, First, Middle Initial) Paul G Pochtar | | | Date of Receipt | | | | | | | | | | |
| | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y 03 20 2009 | | | | | | | | | | |
| | City | State | Zip Code | Transaction ID: A2009-2832528 | | | | | | | | | | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | | | | | | | | | | |
| | FEC ID number of contributing federal political committee. | C | | 165.00 | | | | | | | | | | |
| | Name of Employer Novartis Pharmaceuticals | Occupatio Executiv | | | | | | | | | | | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | | | | | | | | | | | |
| | Primary General Other (specify) ▼ | 0 0 | 495.00 | | | | | | | | | | | |
| - С. | Full Name (Last, First, Middle Initial) David P Riedel | | | Date of Receipt | | | | | | | | | | |
| | Mailing Address One Health Plaza | | | 03 / 20 / Y Y Y Y 2009 | | | | | | | | | | |
| | City East Hanover | State NJ | Zip Code 07936 | Transaction ID: A2009-2832412 Amount of Each Receipt this Period | | | | | | | | | | |
| | FEC ID number of contributing federal political committee. | C | | 68.97 | | | | | | | | | | |
| | Name of Employer Novartis Pharmaceuticals | Occupatio Executiv | | | | | | | | | | | | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date 203.53 | | | | | | | | | | | |
| | SUBTOTAL of Receipts This Page (optional) | | | 333.97 | | | | | | | | | | |
| ŀ | TOTAL This Period (last page this line number | | | | | | | | | | | | | |

| SCHEDU | JLE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 16 / 26 (check only one) |
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| ITEMIZE | D RECEIPTS | | for each category of the Detailed Summary Page | $\begin{array}{c c c c c c c c c c c c c c c c c c c $ |
| | | | | on for the purpose of soliciting contributions solicit contributions from such committee. |
| | COMMITTEE (In Full) | Committee | | |
| Full Name A. Bruce Rus | e (Last, First, Middle Initial) ccio | | | Date of Receipt |
| Mailing Ac | ddress 608 Fifth Avenue | | | 03 / D D / Y Y Y Y 13 / 2009 |
| City | | State | Zip Code | Transaction ID: A2009-2831086 |
| <u>New Yor</u> | rk | NY | 10020 | Amount of Each Receipt this Period |
| | umber of contributing litical committee. | C | | 36.92 |
| Name of E Novartis C | Employer Corporation | Occupatio Manager | | |
| Receipt Fo | | Aggregate | e Year-to-Date 🔻 | |
| Prin Othe | nary General er (specify) 🔻 | 0 0 | 221.52 |] |
| Full Name B. Bruce Rus | e (Last, First, Middle Initial) ccio | | | Date of Receipt |
| Mailing Ac | ddress 608 Fifth Avenue | | | M M / D D / Y Y Y Y 03 / 31 / 2009 |
| City | | State | Zip Code | Transaction ID: A2009-2938005 |
| <u>New Yor</u> | rk | NY | 10020 | Amount of Each Receipt this Period |
| | umber of contributing litical committee. | C | | 36.92 |
| | Employer Corporation | Occupatio Manager | | |
| Receipt Fo | | Aggregate | e Year-to-Date 🔻 | _ |
| Prim Othe | nary General er (specify) 🔻 | | 258.44 |] |
| Full Name | e (Last, First, Middle Initial) usso | I | | Date of Receipt |
| Mailing Ac | ddress One Health Plaza | | | M M / D D / Y Y Y Y 03 / 20 / 2009 |
| City | novor | State | Zip Code | Transaction ID: A2009-2831857 |
| East Ha | | NJ | 07936 | Amount of Each Receipt this Period |
| | umber of contributing litical committee. | C | | 75.00 |
| | Employer Pharmaceuticals | Occupatio Executive | e | |
| Receipt Fo | | Aggregate | e Year-to-Date 🔻 | _ |
| Prim Othe | nary General er (specify) 🔻 | 0 0 | 225.00 |] |
| SUBTOTAL | . of Receipts This Page (optional) | I | \ | 148.84 |
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| | SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | (check only one) | | | | | | | | |
| | ITEMIZED RECEIPTS | | for each category of the Detailed Summary Page | X 11a 11b 11c 12 | | | | | | | | |
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| | Any information copied from such Reports and or for commercial purposes, other than using the | Statements ma e name and ad | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions of solicit contributions from such committee. | | | | | | | | |
| | NAME OF COMMITTEE (In Full) | | | | | | | | | | | |
| | Novartis Corporation Political Action | Committee | | | | | | | | | | |
| <i>А</i> . | Full Name (Last, First, Middle Initial) Katherine E Solon | | | Date of Receipt | | | | | | | | |
| | Mailing Address One Health Plaza | | | M M / D D / Y | | | | | | | | |
| | City | State | Zip Code | Transaction ID: A2009-2833399 | | | | | | | | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | | | | | | | | |
| | FEC ID number of contributing federal political committee. | C | | 500.00 | | | | | | | | |
| | Name of Employer Novartis Services Incorpo- rated | Occupatio Executiv | | | | | | | | | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | | | | | | | | | |
| | Primary General | | 610.92 | 11 | | | | | | | | |
| - | Other (specify) | 0 0 | | | | | | | | | | |
| в. | Full Name (Last, First, Middle Initial) Kenneth A Somberg | | | Date of Receipt | | | | | | | | |
| | Mailing Address One Health Plaza | | | M M / D D / Y Y Y Y Y 03 20 2009 | | | | | | | | |
| | City | State | Zip Code | Transaction ID: A2009-2831986 | | | | | | | | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | | | | | | | | |
| | FEC ID number of contributing federal political committee. | C | | 100.00 | | | | | | | | |
| | Name of Employer Novartis Pharmaceuticals | Occupatio Executiv | | _ | | | | | | | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | | | | | | | | | |
| | Other (specify) ▼ | 0 0 | 300.00 |] | | | | | | | | |
| - | Full Name (Last, First, Middle Initial) | | | Data of Dessist | | | | | | | | |
| C. | Lisa A Steelman Mailing Address One Health Plaza | | | Date of Receipt | | | | | | | | |
| | | | | 03 20 2009 | | | | | | | | |
| | City | State | Zip Code | Transaction ID: A2009-2831844 | | | | | | | | |
| | East Hanover | NJ | 07936 | Amount of Each Receipt this Period | | | | | | | | |
| | FEC ID number of contributing federal political committee. | C | | 115.00 | | | | | | | | |
| | Name of Employer Novartis Pharmaceuticals | Occupatio Executiv | | | | | | | | | | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | | | | | | | | | |
| | Primary General Other (specify) ▼ | | 345.00 |] | | | | | | | | |
| [| | | | 715.00 | | | | | | | | |
| | SUBTOTAL of Receipts This Page (optional) . | | | 113.00 | | | | | | | | |
| | TOTAL This Period (last page this line numbe | r only) | | | | | | | | | | |

| SCHEDULE A (FEC Form ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 18 / 26 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17 n for the purpose of soliciting contributions |
|---|---|--|
| or for commercial purposes, other than u NAME OF COMMITTEE (In Full) Novartis Corporation Political A | ising the name and address of any political committee to a | solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) | | |
| A. Donald P Stevens Mailing Address One Health Pla | za | Date of Receipt |
| City | State Zip Code | 0 3 2 0 2 0 0 9 Transaction ID: A2009-2832056 |
| East Hanover | NJ 07936 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | 75.00 |
| Name of Employer Novartis Pharmaceuticals | Occupation Executive | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |
| Full Name (Last, First, Middle Initial) Barbara A Tombros Mailing Address One Health Pla | za | Date of Receipt |
| | Ctoto Zin Code | 03 20 2009 |
| City East Hanover | State Zip Code NJ 07936 | Transaction ID: A2009-2832513 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 71.55 |
| Name of Employer Novartis Pharmaceuticals | Occupation Executive | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 211.85 | |
| Full Name (Last, First, Middle Initial) Andrew J Volante | | Date of Receipt |
| Mailing Address One Health Pla | za | 03 / 20 / Y Y Y Y 03 / 20 / 2009 |
| City | State Zip Code | Transaction ID: A2009-2832417 |
| East Hanover | NJ 07936 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 100.00 |
| Name of Employer Novartis Pharmaceuticals | Occupation Executive | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 300.00 | |
| SUBTOTAL of Receipts This Page (op | tional) | 246.55 |
| TOTAL This Period (last page this line | number only) | 5776.28 |

| SCHEDULE B (FEC Form | SBURSEMENTS for each category of the | | - | | NE NUMBER: PAGE 19 / 26 only one) | | | | | | | | | | | | |
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| TEMIZED DISBURSEME | Detailed Su | mmary Page | Ē | | 21b 27 | 22 28a | X | 23 28b | | 24 280 | | 25 29 | | | | | |
| Any Information copied from such Repor or for commercial purposes, other than u | | | | | | | | | | | | | s | | | | |
| NAME OF COMMITTEE (In Full) | | or any pointear c | ,011111 | iiite | e 10 30 | | ibuti | 0115 | 1101 | ii sucii | COIII | millee | | | | | |
| Novartis Corporation Political A | ction Committee | | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | Transaction ID: B252540 | | | | | | | | | | | |
| Crapo for US Senate | | | | | | Date of Disbursement | | | y y y v | | | | | | | | |
| Mailing Address 128 North Co | lumbus Street | | | | | | | | | | Ý ŽOŎ9Ÿ | | | | | | |
| City Alexandria | | Zip Code 22314 | | | | Amou | int of | FEad | ch D | Disburs | sement this Period | | | | | | |
| Purpose of Disbursement Contribution | | | 0 | 11 | | L. | | | | | 2 | 500.0 | 0 | | | | |
| Candidate Name Michael D Crapo | | | Cate Ty | ego ype | ry/ | | | | | | | | | | | | |
| Office Sought: House X Senate President | Disbursement For: X Primary Other (specif | 2010 General (y) ▼ | | | | | | | | | | | | | | | |
| State: ID District: | | | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) Whitfield for Congress | | | | | | Date | of Di | sbu | rser | | | | | | | | |
| Mailing Address 217 Third Str | | | 0 3 | М | | 3 (| D / | Ŷ | 200 | 9 [°] | | | | | | | |
| City Washington | | Zip Code 20003 | | | | Amou | int of | Ead | ch D | Disburs | | | | | | | |
| Purpose of Disbursement Contribution | | | 0 | 11 | | L. | | | | | 3 | 000.0 | 0 | | | | |
| Candidate Name Edward Whitfield | | | Cate Ty | ego ype | ry/ | | | | | | | | | | | | |
| Office Sought: X House Senate President | Disbursement For: X Primary Other (specif | 2010 General | | | | | | | | | | | | | | | |
| State: KY District: 01 | | | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) Rodney Alexander for Congress | 3 | | | | | Trans Date | | | | B252 nent | 532 | | | | | | |
| Mailing Address 209 Pennsylv | ania Avenue, SE Suite | | | | | 0 ^M 3 | М | | 18 | B / | Y 2 | źoò | 9 ^Y | | | | |
| City Washington | | Zip Code 20003 | | | | Amou | int o | Ead | ch D | Disburs | emei | nt this | Period | | | | |
| Purpose of Disbursement Contribution | | | Q | 11 | ٦ | L. | | | | | 1 | 000.0 | 0 | | | | |
| Candidate Name Rodney Alexander | | | Cate Ty | ego ype | ry/ | | | | | | | | | | | | |
| Office Sought: X House Senate President | Disbursement For: X Primary Other (specif | 2010 General y) ▼ | | - | | | | | | | | | | | | | |
| State: LA District: 05 | | | | | | | | | | | | | | | | | |
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| SUBTOTAL of Disbursements This Pa | ge (optional) | | | - | ► | | | | | | 65 | 500.0 | 0 | | | | |

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| | | B (FEC Form 3 | | | arate schedule(s) | | | | | INE NUMBER: PAGE 20 | | | | | 20 / | / 26 | | | |
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| IT | | SBURSEMENT | S | | category of the Summary Page | | |] 2 | 21b 27 | | e) 22 28a | X | 23 28b | F | 24 | 4 3c | | 25 29 | \square |
| | | ed from such Reports a rposes, other than using | | | | | | | | | | | | | | | | | 5 |
| וכ | NAME OF COM | | y the name | | | COI | | me | | licit | COIL | ibut | | | II SUC | in c | OIIII | muee | |
| | | pration Political Action | on Comm | nittee | | | | | | | | | | | | | | | |
| | Full Name (Last, Mikulski for Se | First, Middle Initial) enate | | | | | | | | | | | on ID isburs | | - | 525 | 39 | | |
| | Mailing Address | 10 G Street, NE | Suite 47 | 0 | | | | | | | | ž | o ò s |) [×] | | | | | |
| | City Washington | | | State DC | Zip Code 20002 | | | | | / | Amou | nt o | f Each | n D | Disbu | rsei | - | t this I | |
| | Purpose of Disbu Contribution | | | | | | 0- | 11 | | | | | | | | | 25 | 600.0 | 0 |
| | Candidate Name Barbara A Mik | ulski | | | | С | | egor vpe | у/ | | | | | | | | | | |
| | Office Sought: State: MD | House X Senate President District: | Disburser X | ment For: Primary Other (spe | 2010 General ecify) ▼ | | | | | | | | | | | | | | |
| _ | | | | | | | | | | | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) Friends of Roy Blunt | | | | | | | | | | Date o | | on ID | ser | nent | 531 | | Y | Y |
| | Mailing Address 209 Pennsylvania Ave. SE | | | | | | | | | | 0 3 | | | 3 (| Ŏ | Ľ | Ż | 0 ò s | 9 |
| | City Washington | | | State DC | Zip Code 20003 | | | | | | Amou | nt o | f Each | n E | Disbu | rsei | | t this I | |
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| | Candidate Name Roy Blunt | | | | | C | | egor vpe | у/ | | | | | | | | | | |
| | Office Sought: State: MO | X House Senate President District: 07 | Disburser X | ment For: Primary Other (spe | 2010 General ecify) ▼ | | | | | | | | | | | | | | |
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| | Kay Hagan for | | | | | | | | | | Date o | | isburs | | nent | γ_γ | | Y | Y |
| | Mailing Address | 426 C Street, NE | 1 | | | | | | | | [™] 3 | | | 18 | 8 | L | 2 | 0 Ó S | 9 |
| | City Washington | | | State DC | Zip Code 20002 | | | | | 7 | Amou | nt o | f Each | n C | Disbu | rsei | | t this I | |
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| | Candidate Name Kay R Hagan | | | | | С | | egor vpe | у/ | | | | | | | | | | |
| | Office Sought: | House X Senate President | Disburser X | ment For: Primary Other (spe | 2014 General ecify) ▼ | | | | | | | | | | | | | | |
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| NAME OF COMMITTEE (In Full) Novartis Corporation Political Action Com | nittee | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) Lance for Congress | | | | | Trans Date | | | | B252 ment | 2542 | 2 | | | | | |
| Mailing Address P.O. Box 225 | | | | | | | ² o č | 9 | Y | | | | | | | |
| City Colonia | State Zip Code NJ 07067 | | | | Amount of Each Disb | | | | Disbur | ursement this Period | | | | | | |
| Purpose of Disbursement Contribution Candidate Name | | | 011 atego | | L. | | | | | | 000. | 00 | | | | |
| 5 X | ment For: 2010 Primary General Other (specify) ▼ | - | Туре | 9 | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) Friends for Harry Reid | | | | | Date | of Di | isbur | ser | | | | | | | | |
| Mailing Address 426 C Street, NE Rear B | uilding | | | | 0 3 | М | / D | 1 | 8 | Y | ² o č | 9 | Y | | | |
| Washington | State Zip Code DC 20002 | | | | Amou | unt of | f Eac | h [| Disbur | 0 | | 0 | eriod | | | |
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| Full Name (Last, First, Middle Initial) Kurt Schrader for Congress | | | | | Trans Date | | isbur | sei | | 3367 | 7 | | | | | |
| Mailing Address P.O. Box 636 | | | | | ^м З | М | / D | 3 | ^D / | Y | ² o č | 9 | Y | | | |
| City Annandale | State Zip Code VA 22003 | | | | Amou | unt of | f Eac | h [| Disbur | | | - | eriod | | | |
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| NAME OF COMMITTEE (In Full) Novartis Corporation Political Action Comm | vittoo | | | | | | | | | | | | | | |
| 7 Novartis Corporation Folitical Action Comm | nillee | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) Tim Murphy for Congress | | | | | Trans Date | | | | | | 97 | | | | |
| Mailing Address 700 12th Street, NW Suite | e 700 | | | | 0 ^M 3 | М | 1 | ^D 1 | ^D 8 | / Y | ž | ٥ò٩ | θ ^Υ | | |
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| Full Name (Last, First, Middle Initial) BRIDGE PAC | | | | | Transaction ID: B2525 Date of Disbursement | | | | | | | | V | | |
| Mailing Address 499 South Capitol Street, | SW Suit | | | | 0 3 | 3 18 | | Ž | 0 ò s | Эľ | | | | | |
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| Full Name (Last, First, Middle Initial) National Republican Congressional Cmte | | | | | Trans Date | | | | | | 44 | | | | |
| Mailing Address 320 First Street, SE | | | | | 0 ^M 3 | М | / | ^D 1 | ^D 8 | / Y | ž | ٥ò٩ | θ ^Υ | | |
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| ę | SCHEDULE B | (FEC Form 3 | 3X) | | FOR LINE | NUMBER: | PAGE 23/26 |
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| | NAME OF COMMIT Novartis Corpora | , , | on Committee | | | | |
| . – | Full Name (Last, Fir | , | Transaction ID: | 3252545 | | | |
| Α. | Democratic Cong | gressional Camp | Date of Disburseme | ent | | | |
| | Mailing Address | 430 South Capit | | 03 ^M /18 ^D | ⁷ ² 0 0 9 ⁴ | | |
| | City Washington | | State DC | Zip Code 20003 | | Amount of Each Dis | sbursement this Period |
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| | Candidate Name | | | | Category/ Type | | |
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| В. | Full Name (Last, Fir Every Republica | . , | | Transaction ID: E | ent | | |
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| Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of Soliciting or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such MARE OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) Novartis Corporation Political Action Committee Full Name (Last, First, Middle Initial) Transaction ID: B22 Otity State Zip Code Allentown PA 18105 Purpose of Disbursement Pa 18105 Purpose of Disbursement Disbursement For: 2010 York Pa 18105 Purpose of Disbursement President Disbursement For: 2010 State: Disbursement For: 2010 Transaction ID: B22 Other (specify) V Transaction ID: B25 Date of Disbursement Purpose of Disbursement Po: Box 1822 Other (specify) Transaction ID: B25 City State Disbursement For: 2010 Code Mailing Address P.O. Box 1822 Other (specify) Transaction ID: B25 Date of Disbursement Purpose of Disbursement President Disbursement For: 2010 Code Transa | | | | | | | | |
| NAME OF COMMITTEE (in Full) Novartis Corporation Political Action Committee Full Name (Last, First, Middle Initial) Transaction ID: B25 Friends of Karen Beyer Idialing Address Malling Address P.O. Box 990 City State Zip Code Allentown PA 18105 Purpose of Disbursement 011 Cardidate House 131 PA Candidate Name Disbursement For: 2010 Cardidate Name Senate Disbursement For: Purpose of Disbursement President Other (specify) ▼ Transaction ID: B25 De Pasquale for the 95th Transaction ID: B25 De Pasquale for the 95th Other (specify) ▼ Transaction ID: B25 Purpose of Disbursement 011 Category/ Type Transaction ID: B25 Otic State House 95 PA 011 Category/ Type Transaction ID: B25 Other (specify) ▼ General 011 Category/ Type Office Sought: House Disbursement For: 2010 Transaction ID: B25 Friends of Ted Erickson Disbursement For: 2010 Transaction ID: B25 Date of Disbursement Gity </th <th>contributions</th> | contributions | | | | | | | |
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| Karen Beyer Type Office Sought: House Disbursement For: 2010 State: District: Other (specify) Image: Construction of the specify) Image: Construction of the specify) Full Name (Last, First, Middle Initial) De Pasquale for the 95th Image: Construction of the specify) Image: Construction of the specify) Mailing Address P.O. Box 1822 Image: Construction of the specify) Image: Construction of the specify) Amount of Each Disbursement Vork PA 17405 Pasquale Image: Construction of the specify) Image: Construction of the specify) Office Sought: House Disbursement For: 2010 Image: Construction of the specify) Image: Construction of the specify) State: District: House Disbursement For: 2010 Image: Construction of the specify) State: District: House Disbursement For: 2010 Image: Construction of the specify) Full Name (Last, First, Middle Initial) Friends of Ted Erickson Image: Construction of the specify) Image: Construction of the specify) Mailing Address P.O. Box 564 Image: Construction of the specify) Amount of Each Disbursement <tr< td=""><td>250.00</td></tr<> | 250.00 | | | | | | | |
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| Senate X Primary General President Other (specify) ▼ State: District: Transaction ID: B25 Full Name (Last, First, Middle Initial) Friends of Ted Erickson Transaction ID: B25 Mailing Address P.O. Box 564 011 03 M / 018 / 011 City State Zip Code Amount of Each Disbursement Purpose of Disbursement PA 19026 19026 Purpose of Disbursement 011 Category/ Type Category/ Type Office Sought: House Disbursement For: 2010 Office Sought: House Disbursement For: 2010 X Primary General Image: Senate | | | | | | | | |
| Friends of Ted Erickson Date of Disbursement Mailing Address P.O. Box 564 City State Zip Code Drexel Hill PA 19026 Purpose of Disbursement 011 P-2010 State Senate 26 PA 011 Candidate Name 011 Edwin (Ted) Erickson Disbursement For: Office Sought: House Disbursement For: 2010 X Primary General General | | | | | | | | |
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| | 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 | | | | | | |
| لا م. | Full Name (Last, First, Middle Initial) Friends of John Evans Mailing Address P.O. Box 545 | | | | Transaction ID: B252551 Date of Disbursement 0 3 4 7 1 8 7 2 0 0 9 | | |
| | City Harrisburg | State PA | Zip Code 17108 | | Amount of Each Disbursement this Period | | |
| | Purpose of Disbursement P-2010 State House 05 PA | | | 011 | 300.00 | | |
| | Candidate Name John Evans | | | Category/ Type | | | |
| | Office Sought: House I Senate President State: District: | Disbursement For: X Primary Other (spe | 2010 General cify) ▼ | | | | |
| в. | Full Name (Last, First, Middle Initial) Friends of Jennifer Mann | | | | Transaction ID: B252553 Date of Disbursement | | |
| | Mailing Address P.O. Box 1881 | | | | M M / D D / Y | | |
| | City Allentown | State PA | Zip Code 18105 | | Amount of Each Disbursement this Period | | |
| | Purpose of Disbursement P-2010 State House 132 PA | | | 011 | 500.00 | | |
| | Candidate Name Jennifer Mann | | | Category/ Type | | | |
| | Senate President | Disbursement For: X Primary Other (spe | 2010 General cify) ▼ | | | | |
| | State: District: | | | | | | |

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Form/Schedule:**SA11AI** Transaction ID: Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.