

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

Office Use Only

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

12FE4M5

Novartis Corporation Political Action Committee

ADDRESS (number and street)

801 Pennsylvania Ave. NW Suite 700

Check if different
than previously
reported. (ACC)

Washington

DC

20004-2608

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00033969

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly
Report
Due On:

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

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

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

Election on

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

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

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

Election on

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
03 01 2018

through

M M M / D D D / Y Y Y Y Y Y
03 31 2018

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

O'Neil, Shawn, , ,

Type or Print Name of Treasurer

Signature of Treasurer

O'Neil, Shawn, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
04 19 2018

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

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Novartis Corporation Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y 03 / 01 / 2018 To: M M / D D / Y Y Y Y Y 03 / 31 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2018		115984.18
(b) Cash on Hand at Beginning of Reporting Period.....	90922.97	
(c) Total Receipts (from Line 19)	27843.97	63806.99
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	118766.94	179791.17
7. Total Disbursements (from Line 31).....	29511.23	90535.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	89255.71	89255.71
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Novartis Corporation Political Action Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	8

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	8

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).....	9580.82	13262.86
(ii) Unitemized	18263.15	50544.13
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	27843.97	63806.99
(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)	27843.97	63806.99
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))	27843.97	63806.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	27843.97	63806.99

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	11.23	35.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	11.23	35.46
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	29500.00	90500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	29511.23	90535.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29511.23	90535.46

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	27843.97	63806.99
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	27843.97	63806.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	11.23	35.46
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	11.23	35.46

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 57

(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Ammon, Brian, S.,

Mailing Address One Health Plaza

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

C

Name of Employer (for Individual)
NBSOccupation (for Individual)
Deputy Head NPMR Alcon & SDZ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2018

Transaction ID : A2018-607258

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Baron, Neilda, A.,

Mailing Address One Health Plaza

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

C

Name of Employer (for Individual)
OncologyOccupation (for Individual)
Ex Dir Medical Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2018

Transaction ID : A2018-568266

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Baron, Neilda, A.,

Mailing Address One Health Plaza

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

C

Name of Employer (for Individual)
OncologyOccupation (for Individual)
Ex Dir Medical Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2018

Transaction ID : A2018-566910

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

130.00

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

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

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.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 8 OF 57

(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. **Baron, Neilda, A, ,**

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Oncology

Occupation (for Individual)

Ex Dir Medical Services

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607381

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. **Baroni Allmon, Tracy, L, ,**

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

ED State Public Policy

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568510

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

C. **Baroni Allmon, Tracy, L, ,**

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

ED State Public Policy

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566791

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

170.00

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: PAGE 9 OF 57

(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Baroni Allmon, Tracy, L, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
ED State Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607262

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

B. Bylancik, Angela, D, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pharma

Occupation (for Individual)
Ex Dir BD&L Alliance Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568314

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Bylancik, Angela, D, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pharma

Occupation (for Individual)
Ex Dir BD&L Alliance Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566959

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

160.00

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

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Bylancik, Angela, D, ,

Mailing Address One Health Plaza

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

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	30	2018

Transaction ID : A2018-607429

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Casserly, Daniel, P, ,

Mailing Address One Health Plaza

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

C

Name of Employer (for Individual)
CorporateOccupation (for Individual)
Head of Fed Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	02	2018

Transaction ID : A2018-568514

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

C. Casserly, Daniel, P, ,

Mailing Address One Health Plaza

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

C

Name of Employer (for Individual)
CorporateOccupation (for Individual)
Head of Fed Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	16	2018

Transaction ID : A2018-566795

Amount of Each Receipt this Period

192.30

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

434.60

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 11 OF 57

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Casserly, Daniel, P, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Head of Fed Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1346.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607266

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

B. Christensen-Boner, Barbara, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Director State&External Affrs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.95

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607267

Amount of Each Receipt this Period

58.00

☐ Memo Item

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

C. Clary, Cathryn, M, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Global Drug Development

Occupation (for Individual)
Global Head Patient Affairs and Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568417

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

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

327.30

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 57

(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Clary, Cathryn, M, ,

Mailing Address One Health Plaza

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

C

Name of Employer (for Individual)
Global Drug DevelopmentOccupation (for Individual)
Global Head Patient Affairs and Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566982

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

B. Clary, Cathryn, M, ,

Mailing Address One Health Plaza

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

C

Name of Employer (for Individual)
Global Drug DevelopmentOccupation (for Individual)
Global Head Patient Affairs and Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607452

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

C. Collins, Julie, A, ,

Mailing Address One Health Plaza

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

C

Name of Employer (for Individual)
AlconOccupation (for Individual)
Global Head Digital

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568349

Amount of Each Receipt this Period

46.15

☐ Memo Item

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

200.15

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 13 OF 57
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Collins, Julie, A, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Alcon

Occupation (for Individual)
Global Head Digital

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566618

Amount of Each Receipt this Period

46.15

☐ Memo Item

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

B. Collins, Julie, A, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Alcon

Occupation (for Individual)
Global Head Digital

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607171

Amount of Each Receipt this Period

46.15

☐ Memo Item

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

C. Conoshenti, Joseph, J, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pharma

Occupation (for Individual)
Director Strategic Account Alliances

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607461

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

122.30

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)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Consier, Kirby, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
AD State Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.38

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566802

Amount of Each Receipt this Period

57.69

☐ Memo Item

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

B. Consier, Kirby, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
AD State Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.07

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607273

Amount of Each Receipt this Period

57.69

☐ Memo Item

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

C. Coombs, Seth, , ,

Mailing Address 350 Massachusetts Avenue

City
Cambridge

State
MA

Zip Code
02139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
VP Oncology and Injectable Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568585

Amount of Each Receipt this Period

46.15

☐ Memo Item

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

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

161.53

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 57
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Coombs, Seth, , ,

Mailing Address 350 Massachusetts Avenue

City
Cambridge

State
MA

Zip Code
02139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
VP Oncology and Injectable Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566865

Amount of Each Receipt this Period

46.15

☐ Memo Item

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

B. Coombs, Seth, , ,

Mailing Address 350 Massachusetts Avenue

City
Cambridge

State
MA

Zip Code
02139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
VP Oncology and Injectable Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607337

Amount of Each Receipt this Period

46.15

☐ Memo Item

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

C. Dixon, Dwayne, T, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Alcon

Occupation (for Individual)
Director Market Development HQ

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568353

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

142.30

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Dixon, Dwayne, T, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Alcon

Occupation (for Individual)

Director Market Development HQ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566622

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Dixon, Dwayne, T, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Alcon

Occupation (for Individual)

Director Market Development HQ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607175

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Esquea, Alison, , ,

Mailing Address 608 Fifth Avenue

City

New York

State

NY

Zip Code

10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sandoz Inc.

Occupation (for Individual)

Director Sandoz Health Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607339

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

130.00

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Farber, Leo, A, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Exec Dir Fed Govt Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 02 / 2018

Transaction ID : A2018-568524

Amount of Each Receipt this Period

50.00



Memo Item

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

B. Farber, Leo, A, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Exec Dir Fed Govt Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 16 / 2018

Transaction ID : A2018-566805

Amount of Each Receipt this Period

50.00



Memo Item

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

C. Farber, Leo, A, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Exec Dir Fed Govt Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

03 / 30 / 2018

Transaction ID : A2018-607276

Amount of Each Receipt this Period

50.00



Memo Item

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

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

150.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 57
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Fellers, Thomas, S, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pharma

Occupation (for Individual)
Medical Account Management & FME

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568643

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Fellers, Thomas, S, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pharma

Occupation (for Individual)
Medical Account Management & FME

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-567047

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Fellers, Thomas, S, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pharma

Occupation (for Individual)
Medical Account Management & FME

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607517

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Fry, Amy, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
VP US Country Head Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 02 / 2018

Transaction ID : A2018-568501

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Fry, Amy, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
VP US Country Head Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
03 / 16 / 2018

Transaction ID : A2018-566782

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Fry, Amy, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
VP US Country Head Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
03 / 30 / 2018

Transaction ID : A2018-607253

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Gentry, Michael, L, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NBS

Occupation (for Individual)
Svc Del & Ops Lead Connectivity

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568526

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

B. Gentry, Michael, L, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NBS

Occupation (for Individual)
Svc Del & Ops Lead Connectivity

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566807

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

C. Gentry, Michael, L, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NBS

Occupation (for Individual)
Svc Del & Ops Lead Connectivity

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

539.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607278

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

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

231.00

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

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

FOR LINE NUMBER: PAGE 21 OF 57
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. George, Deidre, T, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
AD State & External Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568527

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Goldfarb, Steven, L, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pharma

Occupation (for Individual)
VP Legal Section Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568672

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

C. Goldfarb, Steven, L, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pharma

Occupation (for Individual)
VP Legal Section Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-567076

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

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

404.00

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Goldfarb, Steven, L, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pharma

Occupation (for Individual)
VP Legal Section Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607546

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

B. Grande, Nancy, J, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Global Drug Development

Occupation (for Individual)
Head Proc Improv & Compliance IMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568677

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Grande, Nancy, J, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Global Drug Development

Occupation (for Individual)
Head Proc Improv & Compliance IMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-567081

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

177.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Grande, Nancy, J, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Global Drug Development

Occupation (for Individual)
Head Proc Improv & Compliance IMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607551

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Grzegorzewski, Kris, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oncology

Occupation (for Individual)
VP CDMA Solid Tumors Franchise

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-567086

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Grzegorzewski, Kris, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oncology

Occupation (for Individual)
VP CDMA Solid Tumors Franchise

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607556

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

130.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 57

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Gulick, David, E, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Pharma

Occupation (for Individual)

Director New Products

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607559

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Haller, Sarah, E, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NBS

Occupation (for Individual)

VP Intl Public Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568532

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

C. Haller, Sarah, E, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NBS

Occupation (for Individual)

VP Intl Public Affairs

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566812

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

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

184.00

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

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

FOR LINE NUMBER: PAGE 25 OF 57

(check only one)

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

Novartis Corporation Political Action Committee

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

A. Haller, Sarah, E, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NBS

Occupation (for Individual)

VP Intl Public Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

539.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607283

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

B. Hayden, Kathy-Jo, B, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

ED Federal Public Policy&Reimburseme

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566813

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. Hayden, Kathy-Jo, B, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

ED Federal Public Policy&Reimburseme

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607284

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

147.00

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: PAGE 26 OF 57
(check only one)

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

Novartis Corporation Political Action Committee

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

A. Hellberg, Mark, R, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NIBR

Occupation (for Individual)
Executive Director Chemical Technolog

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568333

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Hellberg, Mark, R, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NIBR

Occupation (for Individual)
Executive Director Chemical Technolog

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566602

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Hellberg, Mark, R, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NIBR

Occupation (for Individual)
Executive Director Chemical Technolog

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607965

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

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

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(check only one)

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

Novartis Corporation Political Action Committee

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

A. Hughes, Donald, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Director State Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607288

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Hughson, Melody, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
ED Federal Public Policy & Reimburserr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568538

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Hughson, Melody, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
ED Federal Public Policy & Reimburserr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566818

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

130.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

Novartis Corporation Political Action Committee

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

A. Hughson, Melody, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

ED Federal Public Policy & Reimbursen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607289

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Kamal, Tawfik, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oncology

Occupation (for Individual)

VP-Glb Head of Bus. Exc & Oper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568750

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Kamal, Tawfik, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oncology

Occupation (for Individual)

VP-Glb Head of Bus. Exc & Oper

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-567154

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 29 OF 57

(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Kamal, Tawfik, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oncology

Occupation (for Individual)
VP-Glb Head of Bus. Exc & Oper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607624

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Kan, Sarah, G, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Director State Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568541

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

C. Kan, Sarah, G, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Director State Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566821

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

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

204.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 30 OF 57

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Kan, Sarah, G., ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Director State Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607292

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

B. Kendris, Thomas, N., ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
President Novartis Corp & US Cntry Pr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568503

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Kendris, Thomas, N., ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
President Novartis Corp & US Cntry Pre

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566784

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

277.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 31 OF 57
(check only one)

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

Novartis Corporation Political Action Committee

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

A. Kendris, Thomas, N, ,

Mailing Address One Health Plaza

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

C

Name of Employer (for Individual)
CorporateOccupation (for Individual)
President Novartis Corp & US Cntry Pre

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2018

Transaction ID : A2018-607255

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Kowalski, Robert, W, ,

Mailing Address One Health Plaza

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

C

Name of Employer (for Individual)
Global Drug DevelopmentOccupation (for Individual)
Global Head RA US Head Development

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
03	/	02	/	2018

Transaction ID : A2018-568774

Amount of Each Receipt this Period

46.15

☐ Memo Item

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

C. Kowalski, Robert, W, ,

Mailing Address One Health Plaza

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

C

Name of Employer (for Individual)
Global Drug DevelopmentOccupation (for Individual)
Global Head RA US Head Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2018

Transaction ID : A2018-567178

Amount of Each Receipt this Period

46.15

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

192.30

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

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Kowalski, Robert, W, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Global Drug Development

Occupation (for Individual)
Global Head RA US Head Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607648

Amount of Each Receipt this Period

46.15

☐ Memo Item

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

B. Krayacich, John, M, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pharma

Occupation (for Individual)
VP Head NPC Strategic Plng & BD & L

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607649

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Lawrence, Todd, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pharma

Occupation (for Individual)
Associate Director Systems of Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607666

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

126.15

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Leas, Leigh Anne, A, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
VP and U.S. Country Head Public Polic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

03 / 02 / 2018

Transaction ID : A2018-568545

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Leas, Leigh Anne, A, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
VP and U.S. Country Head Public Polic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 16 / 2018

Transaction ID : A2018-566825

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Leas, Leigh Anne, A, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
VP and U.S. Country Head Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

03 / 30 / 2018

Transaction ID : A2018-607296

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 34 OF 57
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Lennon, David, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oncology

Occupation (for Individual)
Oncology Business Franchise Head

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-567203

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Lloyd, Richard, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oncology

Occupation (for Individual)
Head of Global Market Access Oncology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568869

Amount of Each Receipt this Period

46.15

☐ Memo Item

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

C. Lloyd, Richard, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oncology

Occupation (for Individual)
Head of Global Market Access Oncology

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-567215

Amount of Each Receipt this Period

46.15

☐ Memo Item

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

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

192.30

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

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

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(check only one)

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

Novartis Corporation Political Action Committee

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

A. Lloyd, Richard, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Oncology

Occupation (for Individual)

Head of Global Market Access Oncolog

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

323.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607684

Amount of Each Receipt this Period

46.15

☐ Memo Item

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

B. Lubarsky, Vadim, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

ED CMS Policy & Reimbursement

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607299

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. McGough, Edward, D, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Alcon

Occupation (for Individual)

SVP Global Mfg & Tech Ops

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

576.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568378

Amount of Each Receipt this Period

115.38

☐ Memo Item

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

661.53

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

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

Novartis Corporation Political Action Committee

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

A. McGough, Edward, D, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Alcon

Occupation (for Individual)
SVP Global Mfg & Tech Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.28

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566647

Amount of Each Receipt this Period

115.38

☐ Memo Item

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

B. McGough, Edward, D, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Alcon

Occupation (for Individual)
SVP Global Mfg & Tech Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

807.66

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607200

Amount of Each Receipt this Period

115.38

☐ Memo Item

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

C. McGowan, Joseph, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Exec Dir Fed Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568549

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

280.76

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

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. McGowan, Joseph, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Exec Dir Fed Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566829

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. McGowan, Joseph, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Exec Dir Fed Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607301

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

C. Mennilli, David, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
Director Key Customers

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607344

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

176.15

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

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

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

Novartis Corporation Political Action Committee

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

A. Mui-Lipnik, Shelly, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Exec Dir Fed Govt Affairs & Tax Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.15

Date of Receipt

03 / 02 / 2018

Transaction ID : A2018-568553

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

B. Mui-Lipnik, Shelly, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Exec Dir Fed Govt Affairs & Tax Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.30

Date of Receipt

03 / 16 / 2018

Transaction ID : A2018-566833

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

C. Mui-Lipnik, Shelly, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Exec Dir Fed Govt Affairs & Tax Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

488.45

Date of Receipt

03 / 30 / 2018

Transaction ID : A2018-607305

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

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

288.45

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

Use separate schedule(s)
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Detailed Summary Page

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

Novartis Corporation Political Action Committee

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

A. Myrie, Donna, H, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Pharma

Occupation (for Individual)

Associate Dir Strategic Alliance Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607758

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Neylon, Thomas, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)

VP & Head Tax for Int IP TP M&A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568555

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Neylon, Thomas, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)

VP & Head Tax for Int IP TP M&A

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566835

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

130.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 40 OF 57

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Neylon, Thomas, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

VP & Head Tax for Int IP TP M&A

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607307

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. O'Neail, Shawn, , ,

Mailing Address 608 Fifth Avenue

City

New York

State

NY

Zip Code

10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Head Federal Government Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568557

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

C. O'Neail, Shawn, , ,

Mailing Address 608 Fifth Avenue

City

New York

State

NY

Zip Code

10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Head Federal Government Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

784.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566837

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

434.60

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. O'Neil, Shawn, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Head Federal Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607309

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

B. Phipps, Candice, C, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Director State Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568559

Amount of Each Receipt this Period

110.00

☐ Memo Item

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

C. Phipps, Candice, C, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Director State Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566839

Amount of Each Receipt this Period

110.00

☐ Memo Item

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

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

412.30

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

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

FOR LINE NUMBER: PAGE 42 OF 57
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Phipps, Candice, C, ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Director State Government Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607311

Amount of Each Receipt this Period

115.00



Memo Item

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

B. Pott, Leslie, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sandoz Inc.

Occupation (for Individual)

VP Communications

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568595

Amount of Each Receipt this Period

50.00



Memo Item

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

C. Pott, Leslie, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sandoz Inc.

Occupation (for Individual)

VP Communications

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566875

Amount of Each Receipt this Period

50.00



Memo Item

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

215.00

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)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Pott, Leslie, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
VP Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607347

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Rodgers, Renee, C, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oncology

Occupation (for Individual)
Head Digital Strategy And Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607835

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Schweitzer, Mark, G, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Technical Operations

Occupation (for Individual)
GLHd AS&T SCI Initiatives Oversight

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568565

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

130.00

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

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

FOR LINE NUMBER: PAGE 44 OF 57
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Schweitzer, Mark, G, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Technical Operations

Occupation (for Individual)
GLHd AS&T SCI Initiatives Oversight

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566845

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Schweitzer, Mark, G, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis Technical Operations

Occupation (for Individual)
GLHd AS&T SCI Initiatives Oversight

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607317

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Smith, Brian, P, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Global Drug Development

Occupation (for Individual)
Senior Director Biostatistics

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607972

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

130.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Spurr, Robert, A, ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oncology

Occupation (for Individual)
Oncology US Mkt Access &Health Polic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-569069

Amount of Each Receipt this Period

115.00

☐ Memo Item

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

B. Spurr, Robert, A, ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oncology

Occupation (for Individual)
Oncology US Mkt Access &Health Polic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566521

Amount of Each Receipt this Period

115.00

☐ Memo Item

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

C. Spurr, Robert, A, ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oncology

Occupation (for Individual)
Oncology US Mkt Access &Health Polic

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

805.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607884

Amount of Each Receipt this Period

115.00

☐ Memo Item

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

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

345.00

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

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

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(check only one)

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

Novartis Corporation Political Action Committee

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

A. Subasinghe, Nishani, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Dir Strategic Alliance Dev.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.15

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568572

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

B. Subasinghe, Nishani, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Dir Strategic Alliance Dev.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566852

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

C. Subasinghe, Nishani, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Dir Strategic Alliance Dev.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

408.45

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607324

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

288.45

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

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Suter, Thomas, A, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Dir State & External Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566854

Amount of Each Receipt this Period

38.50

☐ Memo Item

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

B. Suter, Thomas, A, ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Dir State & External Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.15

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607326

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

C. Van Meter, Jennifer, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate

Occupation (for Individual)
Director Quality Ext Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607329

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

164.65

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Vineis, Mark, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
VP Managed Markets Specialty Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2018

Transaction ID : A2018-568604

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

B. Vineis, Mark, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
VP Managed Markets Specialty Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566884

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

C. Vineis, Mark, , ,

Mailing Address One Health Plaza

City
East Hanover

State
NJ

Zip Code
07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
VP Managed Markets Specialty Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

539.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607356

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

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

231.00

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

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

FOR LINE NUMBER:
(check only one)

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

Novartis Corporation Political Action Committee

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

A. Williams, Donna Lee, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Director Federal Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 16 / 2018

Transaction ID : A2018-566860

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

B. Williams, Donna Lee, , ,

Mailing Address One Health Plaza

City

East Hanover

State

NJ

Zip Code

07936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Corporate

Occupation (for Individual)

Director Federal Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 30 / 2018

Transaction ID : A2018-607332

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

C. Wojtylak, Melissa, , ,

Mailing Address 608 Fifth Avenue

City

New York

State

NY

Zip Code

10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sandoz Inc.

Occupation (for Individual)

Director Legal Ops. & Ass. Gen. Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 02 / 2018

Transaction ID : A2018-568605

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

170.00

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

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

FOR LINE NUMBER: PAGE 50 OF 57
(check only one)

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

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

A. Wojtylak, Melissa, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
Director Legal Ops. & Ass. Gen. Couns.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A2018-566885

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Wojtylak, Melissa, , ,

Mailing Address 608 Fifth Avenue

City
New York

State
NY

Zip Code
10020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandoz Inc.

Occupation (for Individual)
Director Legal Ops. & Ass. Gen. Couns.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : A2018-607357

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

100.00

9580.82

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

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Andy Harris for Congress

Mailing Address 617 E. Custis Avenue

City
AlexandriaState
VAZip Code
22301Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Harris, Andy, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MD

District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2018

FEC Identification Number

C C00435974

Transaction ID : B682963

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bera for Congress

Mailing Address PO Box 582496

City
Elk GroveState
CAZip Code
95758Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Bera, Amerish, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2018

FEC Identification Number

C C00461061

Transaction ID : B682964

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Brady for Congress

Mailing Address 104 Hume Avenue

City
AlexandriaState
VAZip Code
22301Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Brady, Kevin, P, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX

District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2018

FEC Identification Number

C C00311043

Transaction ID : B682952

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

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

PAGE 52 OF 57

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

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. Bucshon for Congress

Mailing Address 526 6th Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Bucshon, Larry, D, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	2			2	0	1	8		

FEC Identification Number

C C00468256**Transaction ID : B682966**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cmte to Re-elect Linda Sanchez

Mailing Address 415 New Jersey Avenue SE #1

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Sanchez, Linda, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 38

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	2			2	0	1	8		

FEC Identification Number

C C00384057**Transaction ID : B682919**

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Cory Gardner for Senate

Mailing Address 1020 N. Fairfax St. Suite 201

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Gardner, Cory, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State: CO

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	2			2	0	1	8		

FEC Identification Number

C C00492454**Transaction ID : B682950**

Amount of Each Disbursement this Period

1000.00

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

5500.00

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

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

PAGE 53 OF 57

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Donnelly for Indiana

Mailing Address 303 Massachusetts Avenue NE

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Donnelly, Joseph, S, ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: IN

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	2			2	0	1	8		

FEC Identification Number

C C00393652**Transaction ID : B682953**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Mazie Hirono

Mailing Address 303 Massachusetts Ave. NE

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Hirono, Mazie, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: HI

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	2			2	0	1	8		

FEC Identification Number

C C00420760**Transaction ID : B682939**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Heidi for Senate

Mailing Address 1140 3rd Street NE Suite 200

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Heitkamp, Heidi, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: ND

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	2			2	0	1	8		

FEC Identification Number

C C00505552**Transaction ID : B682941**

Amount of Each Disbursement this Period

3000.00

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

5000.00

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

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

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hudson for Congress

Mailing Address 412 S. Capitol St. SE Suite B

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Hudson, Richard, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: NC

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	2			2	0	1	8		

FEC Identification Number

C C00504522**Transaction ID : B682942**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lance for Congress

Mailing Address 10006 Pendleton Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Lance, Leonard, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ

District: 07

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	2			2	0	1	8		

FEC Identification Number

C C00444224**Transaction ID : B682969**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lone Star Leadership PAC

Mailing Address P.O. Box 15239

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Not Applicable

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	2			2	0	1	8		

FEC Identification Number

C C00415208**Transaction ID : B682971**

Amount of Each Disbursement this Period

1000.00

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

4500.00

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

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

PAGE 55 OF 57

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mike Crapo for US Senate

Mailing Address 25 E Masonic View Avenue

City
AlexandriaState
VAZip Code
22301Purpose of Disbursement
Contribution

011

Candidate Name

Crapo, Michael, D, ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: ID District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	2			2	0	1	8		

FEC Identification Number

C C00330886**Transaction ID : B682968**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Moulton for Congress Committee

Mailing Address 415 New Jersey Ave. SE #1

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Candidate Name

Moulton, Seth, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	2			2	0	1	8		

FEC Identification Number

C C00547240**Transaction ID : B682962**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. People for Patty Murray

Mailing Address 1602 Belle View Boulevard #510

City
AlexandriaState
VAZip Code
22307Purpose of Disbursement
Contribution

011

Candidate Name

Murray, Patty, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	2			2	0	1	8		

FEC Identification Number

C C00257642**Transaction ID : B682967**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

PAGE 56 OF 57

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ryan For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	22	/	2018

Mailing Address 320 First Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Ryan, Paul, D, ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 01

FEC Identification Number

C C00330894

Transaction ID : B682940

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stivers for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	22	/	2018

Mailing Address 217 Third Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Stivers, Steve, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2018
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 15

FEC Identification Number

C C00441352

Transaction ID : B682965

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Walker 4 NC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	22	/	2018

Mailing Address 1001 Pennsylvania Ave NW #1300

City
WashingtonState
DCZip Code
20004Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Walker, Mark, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 06

FEC Identification Number

C C00543231

Transaction ID : B682970

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00

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

PAGE 57 OF 57

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

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NAME OF COMMITTEE (In Full)

Novartis Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Carper for Senate

Mailing Address 303 Massachusetts Avenue NE

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Carper, Tom, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: DE

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	1	8		

FEC Identification Number

C C00349217

Transaction ID : B681228

Amount of Each Disbursement this Period

1000.00

☒ Memo Item As reported on 2018 March
Monthly(M3) report

Full Name (Last, First, Middle Initial)

B. Carper for Senate

Mailing Address 303 Massachusetts Avenue NE

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Carper, Tom, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: DE

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	1	8		

FEC Identification Number

C C00349217

Transaction ID : B681229

Amount of Each Disbursement this Period

1000.00

☒ Memo Item Redesignation of above contribution

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

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

0.00

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

29500.00