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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Novocure Inc. PAC 20 Valley Stream Pkwy ADDRESS (number and street) (Check if address is changed) Malvern 19355 PΑ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS tlongsworth@novocure.com (Check if address is changed) Optional Second E-Mail Address fleonard@novocure.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00562546 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Longsworth, Todd, , , Type or Print Name of Treasurer Longsworth, Todd,,, [Electronically Filed] 12 15 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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		OMMITTEE	raye z				
Can	didate	Committee:					
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Nam Cand	e of didate						
	didate / Affiliati	Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Cand	e of didate						
Par	ty Con	nmittee:	(Damas and the				
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Poli	tical A	ction Committee (PAC):					
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a				
		Corporation Corporation w/o Capital Stock	Labor Organization				
		Membership Organization Trade Association	Cooperative				
		In addition, this committee is a Lobbyist/Registrant PAC.					
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)						
		In addition, this committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Join	t Fund	Iraising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political				
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political				
	Com	Committees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4.						

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Write or Type Committee Nam	ne	
Novocure Inc.	PAC	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leade	ership PAC Sponsor
Novocure Inc.		
Mailing Address	195 Commerce Way	
	Portsmouth NH 03801 CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	_eadership PAC Sponsor
Custodian of Records: Idea books and records.	entify by name, address (phone number optional) and position of the person in p	possession of committee
	rth, Todd, , ,	
Full Name	132 Trianon Lane	
Mailing Address		
	Villanova PA 19085	;
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	767
Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
Full Name Longswor of Treasurer	rth, Todd, , ,	
Mailing Address	132 Trianon Lane	
	Villanova PA 19085	
Title or Position Treasurer	CITY STATE Telephone number 212 - [ZIP CODE 767

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Full Name of Designated Agent	Leonard, Francis, X, ,					
Mailing Address	3416 Goshen Road					
	Newtown Square , PA , 19073					
		ZIP CODE				
Title or Position Asst Treasurer	Telephone number 212 -	767 - 7536				
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.						
Mailing Address	J.P. Morgan 270 Park Avenue					
Mailing Address						
	New York NY 10017					
	CITY STATE	ZIP CODE				
Name of Bank, D	pepository, etc.					
Mailing Address						
	CITY STATE	ZIP CODE				