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FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12PE4M5

Novo Nordisk Inc. Political Action Committee

ADDRESS (number and street) ▼ 500 New Jersey Ave., NW

(Check if address is changed) Suite 350

Washington | DC | 20001 -

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

N/A

COMMITTEE'S WEB PAGE ADDRESS (URL)

N/A

COMMITTEE'S FAX NUMBER

- -

2. DATE 05 19 2006

3. FEC IDENTIFICATION NUMBER ▶ C

4. IS THIS STATEMENT X 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.

Type or Print Name of Treasurer Michael Mawby

Signature of Treasurer Michael Mawby Date 05 26 2006

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 Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

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5. TYPE OF COMMITTEE (Check One)

(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.)

Name of Candidate

Candidate Party Affiliation | Office Sought: House Senate President | State | District

(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

(e) X This committee is a separate segregated fund.

(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Novo Nordisk Inc.

Mailing Address 100 College Road West

Princeton | NJ | 08540 -

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship connected

Type of Connected Organization:

X Corporation | Corporation w/o Capital Stock | Labor Organization

Membership Organization | Trade Association | Cooperative

2003000072

Write or Type Committee Name

Novo Nordisk Inc. Political Action Committee

7. **Custodian of Records:** Identify by name, address (phone number – optional) and position of the person in possession of committee books and records.

Full Name: Christopher McGowen

Mailing Address: 500 New Jersey Ave., NW
Suite 350
Washington | DC | 20001

Title or Position ▼: Director of Government Affairs

CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number: 202 - 626 - 4522

8. **Treasurer:** List the name and address (phone number – optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer: Michael Mawby

Mailing Address: 500 New Jersey Ave., NW
Suite 350
Washington | DC | 20001

Title or Position ▼: Chief Government Affairs Officer

CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number: 202 - 626 - 4521

Full Name of Designated Agent: Christopher Porter

Mailing Address: 500 New Jersey Ave., NW
Suite 350
Washington | DC | 20001

Title or Position ▼: Director of Government Affairs

CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number: 202 - 626 - 4524

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9. **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.

Wachovia

Mailing Address 444 N Capitol St., NW

Washington | DC | 20001 -

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

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Federal Election Commission

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