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

NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

ADDRESS (number and street) ▼

1550 LIBERTY RIDGE DRIVE

SUITE 115

☐ Check if different than previously reported. (ACC)

WAYNE | PA | 19087-5573 –

CITY ▲ | STATE ▲ | ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00562546

3. IS THIS REPORT ☒ NEW (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)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☒ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ 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 / D D / 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 / D D / Y Y Y Y in the State of

5. Covering Period 08 / 01 / 2026 through 08 / 31 / 2026

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

Type or Print Name of Treasurer MEYER, KATHERINE, ROSE, MS.,

Signature of Treasurer *MEYER, KATHERINE, ROSE, MS.,* Date 09 / 10 / 2026

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							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 05/2016)

Write or Type Committee Name

NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

Report Covering the Period: From: 08 / 01 / 2026 To: 08 / 31 / 2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2026		11274.63
(b) Cash on Hand at Beginning of Reporting Period	24767.79	
(c) Total Receipts (from Line 19)	6236.16	54229.32
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	31003.95	65503.95
7. Total Disbursements (from Line 31)	0.00	34500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	31003.95	31003.95
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3X** (Rev. 05/2016)

Write or Type Committee Name

NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

Report Covering the Period: From: 08 / 01 / 2026 To: 08 / 31 / 2026

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)	5003.00	31333.37
(ii) Unitemized	1233.16	22895.95
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	6236.16	54229.32
(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) ▶	6236.16	54229.32
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)) ▶	6236.16	54229.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	6236.16	54229.32

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	34500.00
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))	0.00	34500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	0.00	34500.00

DETAILED SUMMARY PAGE
of Disbursements

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)	6236.16	54229.32
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6236.16	54229.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	0.00	0.00

Image# 202609179904274183

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
PAGE 6 OF 26

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

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

NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ACEVEDO, DANIEL, R, MR.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): REGIONAL BUSINESS DIRECTOR, US

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 496.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : AA7BF70E3DE5E4C1396C

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AMYOT, VINCENT, , MR.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): REGIONAL BUSINESS DIRECTOR, U

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A3C55DC3C31CA4C408D7

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ANYANWU, ANULI, CAROLINE, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR DIRECTOR, PRODUCT PORT

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 672.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A5EE197ED30AB4048843

Amount of Each Receipt this Period: 84.00

☐ Memo Item

PAYROLL DEDUCTION: $42.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 186.00

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

Image# 202609179904274184

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

NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AVGEROPOULOS, NICHOLAS, GEORGE, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): THERAPEUTIC AREA LEAD, MEDICAI

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : AD2197499B60343448CF

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BLAZINA, DAVID, ROBERT, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): VICE PRESIDENT, LEAD BRAND COU

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 992.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A97D5CBD998A14BEA836

Amount of Each Receipt this Period: 124.00

☐ Memo Item

PAYROLL DEDUCTION: $62.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BURNS, LORI, ANN, MRS.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): ASSOCIATE DIRECTOR, REGULATOF

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 400.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A6C06656344364D549E2

Amount of Each Receipt this Period: 50.00

☐ Memo Item

PAYROLL DEDUCTION: $25.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 214.00

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

Image# 202609179904274185

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)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CHAPERON-DEWOLF, GWENDOLYNNE, , ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR MANAGER, ISMS - CYBERSE

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A70DED4DF546843A990B

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CHAVEZ, GORDON, VINCENT, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR MANAGER, RESEARCH INIT

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 496.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A6F7B47ABA8C844E88D7

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CULLINAN, BRIAN, JOSEPH, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): ASSOCIATE DIRECTOR, PRODUCT M

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : AA1B2C1F031B344A386A

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 142.00

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

Image# 202609179904274186

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 9 OF 26

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

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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DAVIS, JOSEPH, , ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): COMMERCIAL ACCOUNT DIRECTOR

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 496.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A6066A85BB6F8469C91F

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DIGNAN, KIM, E, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): VICE PRESIDENT, REVENUE OPERA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : ADD012D10D6094297992

Amount of Each Receipt this Period: 125.00

☐ Memo Item

PAYROLL DEDUCTION: $62.50/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DRAGICEVIC, SVJETLANA, , MRS.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): DIRECTOR, NORTH AMERICA PATIEN

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 496.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : AEC47EEFCBCBD4FC8A1E

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 249.00

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

Image# 202609179904274187

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)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
FELIX, KATIA, , MRS.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): HEAD OF HUMAN RESOURCES, NOF

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 639.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A7DDA2A0DA7FB40E9956

Amount of Each Receipt this Period: 84.00

☐ Memo Item

PAYROLL DEDUCTION: $42.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
FLORES, YENI, , ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR REGIONAL DEVICE SUPPOI

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 280.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : AB33F47742B0049BCAC2

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HADUCH, RONALD, , ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR DIRECTOR, BUSINESS PROC

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 672.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A516AC7DB93C8477A882

Amount of Each Receipt this Period: 84.00

☐ Memo Item

PAYROLL DEDUCTION: $42.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 208.00

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

Image# 202609179904274188

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 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HALPREN, JAIMEE, BECKER, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR MANAGER, ADVOCACY

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A07E4527EA198403EAD1

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HENDERSON, BROGAN, ELIZABETH, MRS.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): TERRITORY MANAGER

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : AC2DC5382834C46979CC

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERSHEY, ISAAC, DOUGLAS, MR.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR MANAGER, US ONCOLOGY E

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A09C444900945447EAA8

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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

Image# 202609179904274189

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HURLEY, PATRICK, , ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): DIRECTOR, PRODUCT DEVELOPMEI

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 240.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : AA12F100C49CC46379D1

Amount of Each Receipt this Period: 30.00

☐ Memo Item

PAYROLL DEDUCTION: $15.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JUDD, TIMOTHY, MICHAEL, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): TERRITORY MANAGER

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A3BF842CE09B549FE96A

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEHL, JASON, MICHAEL, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): DIRECTOR, CORPORATE REPORTIN(

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 480.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A99624B9E84E249FCAAE

Amount of Each Receipt this Period: 60.00

☐ Memo Item

PAYROLL DEDUCTION: $30.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 130.00

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

Image# 202609179904274190

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KELLY, SEAN, M, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): REGIONAL BUSINESS DIRECTOR, US

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A5E215D90BD4741E982E

Amount of Each Receipt this Period: 20.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KENNA, EDWARD, , ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): VICE PRESIDENT, INFRASTRUCTUR

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1920.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : AD2B34B401C2A43E3BD0

Amount of Each Receipt this Period: 240.00

☐ Memo Item

PAYROLL DEDUCTION: $120.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KING, JOSHUA, , MR.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): DIRECTOR, STRATEGIC ACCOUNTS,

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A349356B1FB55450295A

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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

Image# 202609179904274191

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KOZLOVA, MASHA, VADIMOVNA, MS.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): ASSOCIATE TERRITORY MANAGER

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A0C3045C810DF432C86D

Amount of Each Receipt this Period: 30.00

☐ Memo Item

PAYROLL DEDUCTION: $15.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KUTSAR, VADIM, , DR.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): MEDICAL DIRECTOR, US CNS ONCC

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 279.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A8BC5BB12866548E6ACA

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LAINO, JEAN, MARIE, MRS.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): CNS REGIONAL MARKETER

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 944.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A6AE40ACBC1DC4BEA97F

Amount of Each Receipt this Period: 118.00

☐ Memo Item

PAYROLL DEDUCTION: $59.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 210.00

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

Image# 202609179904274192

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 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEONE, JEAN, M, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): DIRECTOR, MARKET ACCESS

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 465.00

Date of Receipt: 08 / 31 / 2026

Transaction ID : A8B60B5BFFC364AF7AAA

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEPITRE, KENNETH, A, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): VICE PRESIDENT OF SALES AND M/

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 992.00

Date of Receipt: 08 / 31 / 2026

Transaction ID : ADB7D2EEF3CF74DAB931

Amount of Each Receipt this Period: 124.00

☐ Memo Item

PAYROLL DEDUCTION: $62.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LIEDTKA, PATRICK, , ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): DIRECTOR, REIMBURSEMENT POLIC

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 496.00

Date of Receipt: 08 / 31 / 2026

Transaction ID : AF16295248681459A9F0

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 248.00

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

Image# 202609179904274193

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LIPSON, ADAM, , MR.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR MANAGER, TREATMENT PL/

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A3CCAEECD88BB4124BD3

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUSTGARTEN, LEONARDO, , ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): GLOBAL MEDICAL STRATEGY LEAD

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 496.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A7E2262955F3D4D17840

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MANTIPLY, MATTHEW, , MR.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): REGIONAL BUSINESS DIRECTOR, US

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 496.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A65715A426BB24D33BDE

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 164.00

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

Image# 202609179904274194

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MARTIN, ETHAN, NEIL, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR TERRITORY MANAGER

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 496.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : AD3580D2587B54FB9B61

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCCORQUODALE, BRIAN, , ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): ASSOCIATE DIRECTOR, GLOBAL PA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A00ACF539A44247899B8

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCCOY, DANIEL, , ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): DIRECTOR OF PATIENT ACCESS, US

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 496.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A6AD2AFE17B0D44F2AC8

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 164.00

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

Image# 202609179904274195

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCKINNEY, JACQUELINE, , MRS.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR VICE PRESIDENT, NOVOCUI

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1680.00

Date of Receipt: 08 / 31 / 2026

Transaction ID : A734788AF0D274421BA2

Amount of Each Receipt this Period: 210.00

☐ Memo Item

PAYROLL DEDUCTION: $105.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MEYER, KATHERINE, ROSE, MS.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): VICE PRESIDENT, PUBLIC AFFAIRS

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 3328.00

Date of Receipt: 08 / 31 / 2026

Transaction ID : A0711163EA2524532A91

Amount of Each Receipt this Period: 416.00

☐ Memo Item

PAYROLL DEDUCTION: $208.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MILLER, GARY, , ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): HEAD OF GLOBAL COMPLIANCE & PI

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 496.00

Date of Receipt: 08 / 31 / 2026

Transaction ID : A96C562AAC25D4CC58A6

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 688.00

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

Image# 202609179904274196

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MILLER, RANDY, DENNIS, MR.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR DIRECTOR, STRATEGIC AC(

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 672.00

Date of Receipt: 08 / 31 / 2026

Transaction ID : A7A68F7020E354080B46

Amount of Each Receipt this Period: 84.00

☐ Memo Item

PAYROLL DEDUCTION: $42.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MORGAN, TIMOTHY, BLAIR, MR.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): REGIONAL BUSINESS DIRECTOR, U

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 31 / 2026

Transaction ID : A5C783F8A4D7D47D1B3B

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NAPOLITANO, JULIE, D, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): DIRECTOR, STRATEGIC ACCOUNTS

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 372.00

Date of Receipt: 08 / 31 / 2026

Transaction ID : A149D5B2C53FC4640A6C

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 186.00

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

Image# 202609179904274197

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 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OOT, DEVIN, TABITHA, ,
Mailing Address 195 COMMERCE WAY
City: PORTSMOUTH | State: NH | Zip Code: 03801-3243
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR MANAGER, COMMUNITY AN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A60B09F8BB5FA43C7B1D
Amount of Each Receipt this Period: 40.00
☐ Memo Item
PAYROLL DEDUCTION: $20.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PARAVASTHU, MUKUND, , ,
Mailing Address 195 COMMERCE WAY
City: PORTSMOUTH | State: NH | Zip Code: 03801-3243
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): NOVOCURE LLC (USA_LLC)
Occupation (for Individual): CHIEF OPERATING OFFICER
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 1664.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : AD33A0A6CB761431F8BE
Amount of Each Receipt this Period: 208.00
☐ Memo Item
PAYROLL DEDUCTION: $104.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PENNINGTON, KENDA, , ,
Mailing Address 195 COMMERCE WAY
City: PORTSMOUTH | State: NH | Zip Code: 03801-3243
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR VICE PRESIDENT, GLOBAL F
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date ▼: 1920.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A99A0B9B0D34C436B9F3
Amount of Each Receipt this Period: 240.00
☐ Memo Item
PAYROLL DEDUCTION: $120.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 488.00

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

Image# 202609179904274198

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PEREZ, SHARON, ELIZABETH, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): VICE PRESIDENT, GLOBAL MEDICAL

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 992.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A49A1DF162FFF45E29D1

Amount of Each Receipt this Period: 124.00

☐ Memo Item

PAYROLL DEDUCTION: $62.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RASCO, RICHARD, , MR.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): VICE PRESIDENT, BUSINESS OPER/

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 672.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A7438AD0D41B944439B1

Amount of Each Receipt this Period: 84.00

☐ Memo Item

PAYROLL DEDUCTION: $42.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
REYNOLDS, PEYTON, , MR.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR DIRECTOR, GLOBAL STRATE

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1200.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A54F5EFE01B394B4E863

Amount of Each Receipt this Period: 150.00

☐ Memo Item

PAYROLL DEDUCTION: $75.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 358.00

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

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ROBBINS, STEVEN, , ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE LLC (USA_LLC)
Occupation (for Individual): VICE PRESIDENT, LEAD CORPORAT

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 992.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : AFAC4061CCA874271BAD

Amount of Each Receipt this Period: 124.00

☐ Memo Item

PAYROLL DEDUCTION: $62.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ROWE, LYDIA, JOY, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR MANAGER, LEARNING & DE

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : AFBE82280F3F146BC96C

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SIRIOS, ZOILA, REGINA, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR TERRITORY MANAGER

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : AA96B159DFE1F4554949

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 204.00

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

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SMITH, DEAN, E, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): ASSOCIATE DIRECTOR, FACILITIES I

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A6DBCA618A9474568B05

Amount of Each Receipt this Period: 40.00

☐ Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SPENCER, CHRISTINE, ELIZABETH, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): REGIONAL BUSINESS DIRECTOR, U

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 341.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A502D8FDDB1FC4182827

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SWAIM, JASON, R, MR.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR DIRECTOR, PRODUCT INNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 672.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A8B9BFD463FDD4ABA90B

Amount of Each Receipt this Period: 84.00

☐ Memo Item

PAYROLL DEDUCTION: $42.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 186.00

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

Image# 202609179904274201

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TORRES, TISDREY, , MRS.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): MEDICAL DIRECTOR, LEAD, US THO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 496.00

Date of Receipt: 08 / 31 / 2026

Transaction ID : A04BFD53F05834A51837

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WHITSON, MARY, ELISE, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): DIRECTOR, GOVERNMENT ACCESS

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 992.00

Date of Receipt: 08 / 31 / 2026

Transaction ID : A62BB879194644B55833

Amount of Each Receipt this Period: 124.00

☐ Memo Item

PAYROLL DEDUCTION: $62.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WILKINSON, CRAIG, , ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): VICE PRESIDENT, US MEDICAL AFFA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 496.00

Date of Receipt: 08 / 31 / 2026

Transaction ID : A6993FBD5B7E74E3C8EC

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 248.00

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

Image# 202609179904274202

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WILLIAMS, EMILY, MELISSA, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): SENIOR DIRECTOR, GLOBAL DIREC

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 672.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A7494A9E4527E4FDE846

Amount of Each Receipt this Period: 84.00

☐ Memo Item

PAYROLL DEDUCTION: $42.00/BI-MONTHLY

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WORSTER, CHARLES, , ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): VICE PRESIDENT, ENTERPRISE TEC

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 992.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : A098024C9992E45159DE

Amount of Each Receipt this Period: 124.00

☐ Memo Item

PAYROLL DEDUCTION: $62.00/BI-MONTHLY

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZELIN, GLEN, RUSH, ,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): DIRECTOR, US SALES OPERATIONS

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 465.00

Date of Receipt: 08 / 31 / 2026
Transaction ID : AAB9A87FFFC88480487E

Amount of Each Receipt this Period: 62.00

☐ Memo Item

PAYROLL DEDUCTION: $31.00/BI-MONTHLY

SUBTOTAL of Receipts This Page (optional) ▶ 270.00

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

Image# 202609179904274203

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZOELLNER, CATHERINA, YOUJIN, MS.,

Mailing Address 195 COMMERCE WAY

City: PORTSMOUTH | State: NH | Zip Code: 03801-3243

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): NOVOCURE INC (USA_INC)
Occupation (for Individual): DIRECTOR, SCIENTIFIC EXCHANGE,

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 08 / 31 / 2026

Transaction ID : A0E9EE0CBECE740ED909

Amount of Each Receipt this Period: 40.00

- [ ] Memo Item

PAYROLL DEDUCTION: $20.00/BI-MONTHLY

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

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

Amount of Each Receipt this Period

- [ ] Memo Item

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

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

Amount of Each Receipt this Period

- [ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 40.00

TOTAL This Period (last page this line number only) ▶ 5003.00