

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.

Purdue Pharma Inc. Political Action Committee (Purdue PAC)

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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) 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 / / in the State of

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

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

Election on / / in the State of

5. Covering Period / / through / /

07 / 01 / 2015 through 12 / 31 / 2015

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 Brad Griffin

Signature of Treasurer *Brad Griffin* [Electronically Filed] Date / /

01 / 28 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Purdue Pharma Inc. Political Action Committee (Purdue PAC)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		<input type="text" value="17929.75"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="16929.75"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="6276.10"/>	<input type="text" value="20776.10"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="23205.85"/>	<input type="text" value="38705.85"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2500.00"/>	<input type="text" value="18000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="20705.85"/>	<input type="text" value="20705.85"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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. 06/2004)

Write or Type Committee Name

Purdue Pharma Inc. Political Action Committee (Purdue PAC)

Report Covering the Period: From: / / To: / /

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).....	4673.80	19173.80
(ii) Unitemized	1602.30	1602.30
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6276.10	20776.10
(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)	6276.10	20776.10
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))..... ▶	6276.10	20776.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	6276.10	20776.10

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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	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.....	1000.00	15000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	1500.00	3000.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	2500.00	18000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2500.00	18000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6276.10	20776.10
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6276.10	20776.10
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

**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 16
(check only one)
 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)
Purdue Pharma Inc. Political Action Committee (Purdue PAC)

A. Robin E Abrams
 Full Name (Last, First, Middle Initial)
 Mailing Address One Stamford Forum
 201 Tresser Boulevard
 City State Zip Code
 Stamford CT 06901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Purdue Pharma Inc. V.P. Asc. General Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2015
Transaction ID : A2015-2558210
 Amount of Each Receipt this Period
 40.00

B. Robin E Abrams
 Full Name (Last, First, Middle Initial)
 Mailing Address One Stamford Forum
 201 Tresser Boulevard
 City State Zip Code
 Stamford CT 06901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Purdue Pharma Inc. V.P. Asc. General Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2015
Transaction ID : A2015-2620384
 Amount of Each Receipt this Period
 40.00

C. Robin E Abrams
 Full Name (Last, First, Middle Initial)
 Mailing Address One Stamford Forum
 201 Tresser Boulevard
 City State Zip Code
 Stamford CT 06901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Purdue Pharma Inc. V.P. Asc. General Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2015
Transaction ID : A2015-2751024
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <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 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Purdue Pharma Inc. Political Action Committee (Purdue PAC)

A. Raul A Damas
 Full Name (Last, First, Middle Initial)
 Mailing Address One Stamford Forum
 201 Tresser Boulevard
 City State Zip Code
 Stamford CT 06901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Purdue Pharma Inc. VP Corporate Affairs and Communication
 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
 10 / 09 / 2015
Transaction ID : A2015-2303814
 Amount of Each Receipt this Period
 100.00

B. Raul A Damas
 Full Name (Last, First, Middle Initial)
 Mailing Address One Stamford Forum
 201 Tresser Boulevard
 City State Zip Code
 Stamford CT 06901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Purdue Pharma Inc. VP Corporate Affairs and Communication
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2015
Transaction ID : A2015-2365388
 Amount of Each Receipt this Period
 100.00

C. Raul A Damas
 Full Name (Last, First, Middle Initial)
 Mailing Address One Stamford Forum
 201 Tresser Boulevard
 City State Zip Code
 Stamford CT 06901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Purdue Pharma Inc. VP Corporate Affairs and Communication
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2015
Transaction ID : A2015-2427699
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Purdue Pharma Inc. Political Action Committee (Purdue PAC)

A. Raul A Damas
 Full Name (Last, First, Middle Initial)
 Mailing Address One Stamford Forum
 201 Tresser Boulevard
 City State Zip Code
 Stamford CT 06901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Purdue Pharma Inc. VP Corporate Affairs and Communication
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2015
Transaction ID : A2015-2558202
 Amount of Each Receipt this Period
 100.00

B. Raul A Damas
 Full Name (Last, First, Middle Initial)
 Mailing Address One Stamford Forum
 201 Tresser Boulevard
 City State Zip Code
 Stamford CT 06901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Purdue Pharma Inc. VP Corporate Affairs and Communication
 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
 12 / 04 / 2015
Transaction ID : A2015-2620376
 Amount of Each Receipt this Period
 100.00

C. Raul A Damas
 Full Name (Last, First, Middle Initial)
 Mailing Address One Stamford Forum
 201 Tresser Boulevard
 City State Zip Code
 Stamford CT 06901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Purdue Pharma Inc. VP Corporate Affairs and Communication
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2015
Transaction ID : A2015-2751016
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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)	PAGE 10 OF 16
<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)
Purdue Pharma Inc. Political Action Committee (Purdue PAC)

A. Dr. James David Haddox
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 Weed Avenue
 City Stamford State CT Zip Code 06902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Purdue Pharma Inc. Executive
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2015
Transaction ID : A2015-2442192
 Amount of Each Receipt this Period
 2000.00

B. Saeed Motahari
 Full Name (Last, First, Middle Initial)
 Mailing Address One Stamford Forum
 201 Tresser Boulevard
 City Stamford State CT Zip Code 06901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Purdue Pharma Inc. Sr. VP & Chief Commercial Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2015
Transaction ID : A2015-2365390
 Amount of Each Receipt this Period
 60.00

C. Saeed Motahari
 Full Name (Last, First, Middle Initial)
 Mailing Address One Stamford Forum
 201 Tresser Boulevard
 City Stamford State CT Zip Code 06901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Purdue Pharma Inc. Sr. VP & Chief Commercial Officer
 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
 11 / 06 / 2015
Transaction ID : A2015-2427701
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2120.00
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 11 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Purdue Pharma Inc. Political Action Committee (Purdue PAC)

A. Saeed Motahari
Full Name (Last, First, Middle Initial)

Mailing Address One Stamford Forum
201 Tresser Boulevard

City State Zip Code
Stamford CT 06901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Purdue Pharma Inc. Sr. VP & Chief Commercial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 20 / 2015
Transaction ID : A2015-2558204

Amount of Each Receipt this Period
60.00

B. Saeed Motahari
Full Name (Last, First, Middle Initial)

Mailing Address One Stamford Forum
201 Tresser Boulevard

City State Zip Code
Stamford CT 06901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Purdue Pharma Inc. Sr. VP & Chief Commercial Officer

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
12 / 04 / 2015
Transaction ID : A2015-2620378

Amount of Each Receipt this Period
60.00

C. Saeed Motahari
Full Name (Last, First, Middle Initial)

Mailing Address One Stamford Forum
201 Tresser Boulevard

City State Zip Code
Stamford CT 06901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Purdue Pharma Inc. Sr. VP & Chief Commercial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 18 / 2015
Transaction ID : A2015-2751018

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 12 OF 16
(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)
Purdue Pharma Inc. Political Action Committee (Purdue PAC)

Full Name (Last, First, Middle Initial)
A. Alan Must

Mailing Address 201 Tresser Blvd.

City Stamford	State CT	Zip Code 06877
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FEC ID number of contributing federal political committee. **C**

Name of Employer Purdue Pharma Inc.	Occupation Management
--	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2015

Transaction ID : A2015-2153847

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Joseph W Northington

Mailing Address 4701 Purdue Drive

City Wilson	State NC	Zip Code 27893
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Purdue Pharmaceuticals LP	Occupation Head of Quality
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
384.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

Transaction ID : A2015-2303812

Amount of Each Receipt this Period
192.30

Full Name (Last, First, Middle Initial)
C. Joseph W Northington

Mailing Address 4701 Purdue Drive

City Wilson	State NC	Zip Code 27893
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FEC ID number of contributing federal political committee. **C**

Name of Employer Purdue Pharmaceuticals LP	Occupation Head of Quality
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
576.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

Transaction ID : A2015-2365386

Amount of Each Receipt this Period
192.30

SUBTOTAL of Receipts This Page (optional).....▶	884.60
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 13 OF 16
<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)
Purdue Pharma Inc. Political Action Committee (Purdue PAC)

Full Name (Last, First, Middle Initial) A. Joseph W Northington		Date of Receipt
Mailing Address 4701 Purdue Drive		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City State Zip Code Wilson NC 27893		Transaction ID : A2015-2427697
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="192.30"/>
Name of Employer Purdue Pharmaceuticals LP	Occupation Head of Quality	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="769.20"/>	

Full Name (Last, First, Middle Initial) B. Joseph W Northington		Date of Receipt
Mailing Address 4701 Purdue Drive		<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City State Zip Code Wilson NC 27893		Transaction ID : A2015-2558200
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="192.30"/>
Name of Employer Purdue Pharmaceuticals LP	Occupation Head of Quality	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="961.50"/>	

Full Name (Last, First, Middle Initial) C. Joseph W Northington		Date of Receipt
Mailing Address 4701 Purdue Drive		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2015"/>
City State Zip Code Wilson NC 27893		Transaction ID : A2015-2620374
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="192.30"/>
Name of Employer Purdue Pharmaceuticals LP	Occupation Head of Quality	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1153.80"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="576.90"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 14 OF 16
(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)
Purdue Pharma Inc. Political Action Committee (Purdue PAC)

A. Full Name (Last, First, Middle Initial)
Joseph W Northington

Mailing Address 4701 Purdue Drive

City State Zip Code
Wilson NC 27893

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Purdue Pharmaceuticals LP Head of Quality

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1346.10

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 18 / 2015

Transaction ID : A2015-2751014

Amount of Each Receipt this Period
192.30

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	192.30
TOTAL This Period (last page this line number only).....▶	4673.80

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Purdue Pharma Inc. Political Action Committee (Purdue PAC)

Full Name (Last, First, Middle Initial)

A. Butterfield for Congress Committee

Mailing Address 434 Fayetteville Street Suite 2020

City Raleigh State NC Zip Code 27601

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

G.K. Butterfield

Office Sought: House
 Senate
 President
State: NC District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : B577171

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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 Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Purdue Pharma Inc. Political Action Committee (Purdue PAC)

Full Name (Last, First, Middle Initial)

A. Rob Standridge for Senate Campaign

Mailing Address 101 E Gray Suite A

City Norman State OK Zip Code 73069

Purpose of Disbursement
P-2016 State Senate 15 OK

011

Category/
Type

Candidate Name

Rob Standridge

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OK District: 15

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : B586795

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Morrissey for Attorney General

Mailing Address P.O. Box 820

City Charlestown State WV Zip Code 25414

Purpose of Disbursement
P-2016 State Att. General WV

011

Category/
Type

Candidate Name

Patrick Morrissey

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WV District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 05 / 2015

Transaction ID : B579331

Amount of Each Disbursement this Period

500.00

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

1500.00

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

1500.00