

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Endo Pharmaceuticals Inc Political Action Committee (ENDO 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="46016.16"/>	<input type="text" value="46016.16"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="41327.66"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="5919.50"/>	<input type="text" value="25231.00"/>
(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="47247.16"/>	<input type="text" value="71247.16"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9000.00"/>	<input type="text" value="33000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="38247.16"/>	<input type="text" value="38247.16"/>
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)

Page 3

Write or Type Committee Name

Endo Pharmaceuticals Inc Political Action Committee (ENDO 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).....	4954.50	16056.84
(ii) Unitemized	965.00	9174.16
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5919.50	25231.00
(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)	5919.50	25231.00
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))..... ▶	5919.50	25231.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5919.50	25231.00

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.....	7000.00	31000.00
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	2000.00	2000.00
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)) ..	9000.00	33000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9000.00	33000.00

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)	5919.50	25231.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5919.50	25231.00
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: (check only one)	PAGE 6 OF 15
<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

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)
Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

A. Steve Bordenave
 Full Name (Last, First, Middle Initial)
 Mailing Address 1843 Alex Way
 City Turlock State CA Zip Code 95382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Endo Pharmaceuticals Occupation Pharmaceutical Sales Professional
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : C82747
 Amount of Each Receipt this Period
 50.00
 * Payroll Deduction:

B. Elizabeth Bush
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 East Tansey Drive
 City Aston State PA Zip Code 19014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Endo Pharmaceuticals Occupation Government Affairs Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : C82755
 Amount of Each Receipt this Period
 40.00
 * Payroll Deduction:

C. Timothy Byrne
 Full Name (Last, First, Middle Initial)
 Mailing Address 8050 Fair View Lane
 City Norristown State PA Zip Code 19403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Endo Pharmaceuticals Occupation Sr Dir Public Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : C82741
 Amount of Each Receipt this Period
 250.00
 * Payroll Deduction:

SUBTOTAL of Receipts This Page (optional).....▶	340.00
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 8 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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)
Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial) A. Donald DeGolyer		Date of Receipt
Mailing Address 293 Fairmount Avenue		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
Chatham	NJ	07928
FEC ID number of contributing federal political committee.		Transaction ID : C82769
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="333.34"/>
Name of Employer	Occupation	* Payroll Deduction:
Endo Pharmaceuticals	Sr Strategic Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		<input type="text" value="2000.04"/>

Full Name (Last, First, Middle Initial) B. Rajiv DeSilva		Date of Receipt
Mailing Address 120 Masons Way		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
Newtown Square	PA	19073
FEC ID number of contributing federal political committee.		Transaction ID : C82752
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="416.00"/>
Name of Employer	Occupation	* Payroll Deduction:
Endo Pharmaceuticals	CEO and President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		<input type="text" value="2496.00"/>

Full Name (Last, First, Middle Initial) C. Guy Donatiello		Date of Receipt
Mailing Address 321 North Ithan Ave		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
Rosemont	PA	19010
FEC ID number of contributing federal political committee.		Transaction ID : C82756
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="60.00"/>
Name of Employer	Occupation	* Payroll Deduction:
Endo Pharmaceuticals	SVP Intellectual Property	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		<input type="text" value="360.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="809.34"/>
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: (check only one)	PAGE 9 OF 15
<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)
Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial) A. Jennifer Dubas		Date of Receipt MM / DD / YYYY 06 / 30 / 2015
Mailing Address 315 R Glad Way		Transaction ID : C82748
City Collegeville	State PA	Zip Code 19426
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Endo Pharmaceuticals	Occupation SVP & Assoc General Counsel	* Payroll Deduction:
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Caroline Manogue		Date of Receipt MM / DD / YYYY 06 / 30 / 2015
Mailing Address 302 Keithwood Road		Transaction ID : C82760
City Wynnewood	State PA	Zip Code 19096
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
Name of Employer Endo Pharmaceuticals	Occupation Legal Advisor	* Payroll Deduction:
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00	

Full Name (Last, First, Middle Initial) C. James Manser		Date of Receipt MM / DD / YYYY 06 / 30 / 2015
Mailing Address 1875 Rampart Lane		Transaction ID : C82776
City Lansdale	State PA	Zip Code 19446
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Endo Pharmaceuticals	Occupation Dir State Government & External Affairs	* Payroll Deduction:
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional).....▶	666.00
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 15
<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)
Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

A. Eileen McLaughlin
Full Name (Last, First, Middle Initial)

Mailing Address 1322 N. Tulip Drive

City West Chester State PA Zip Code 19380

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

Name of Employer Endo Pharmaceuticals Occupation Sr Audit Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt 06 / 25 / 2015
Transaction ID : C82707

Amount of Each Receipt this Period 264.00

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

Mailing Address 9447 Brenner Court

City Vienna State VA Zip Code 22180

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

Name of Employer Endo Pharmaceuticals Occupation SVP Government Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 996.00

Date of Receipt 06 / 30 / 2015
Transaction ID : C82766

Amount of Each Receipt this Period 166.00

* Payroll Deduction:

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

Mailing Address 2514 Pine Street

City Philadelphia State PA Zip Code 19103

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

Name of Employer Endo Pharmaceuticals Occupation Dir Investor Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2015
Transaction ID : C82743

Amount of Each Receipt this Period 100.00

* Payroll Deduction:

SUBTOTAL of Receipts This Page (optional)..... ▶ 530.00

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 11 OF 15
<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)
Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial) A. Robert Rush		Date of Receipt MM / DD / YYYY 06 / 30 / 2015
Mailing Address 2006 Fairfield Drive		Transaction ID : C82746
City Wilmington	State DE	Zip Code 19810
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Endo Pharmaceuticals	Occupation General Manager	* Payroll Deduction:
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. Laurence Smith		Date of Receipt MM / DD / YYYY 06 / 30 / 2015
Mailing Address 9630 Eagle Ridge Dr.		Transaction ID : C82750
City Bethesda	State MD	Zip Code 20817
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 166.66
Name of Employer Endo Pharmaceuticals	Occupation SVP Tax	* Payroll Deduction:
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 999.96	

Full Name (Last, First, Middle Initial) C. Jon Smollen		Date of Receipt MM / DD / YYYY 06 / 30 / 2015
Mailing Address 2117 Pine Street		Transaction ID : C82759
City Philadelphia	State PA	Zip Code 19103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 62.50
Name of Employer Endo Pharmaceuticals	Occupation EVP & Chief Compliance Officer	* Payroll Deduction:
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional).....▶	289.16
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 12 OF 15
	<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)
Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

A. Suketu Upadhyay
 Full Name (Last, First, Middle Initial)
 Mailing Address 1809 Cold Spring Dr
 City West Chester State PA Zip Code 19382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Endo Pharmaceuticals Occupation EVP & CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : C82751
 Amount of Each Receipt this Period
 150.00
 * Payroll Deduction:

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 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 Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	4954.50

**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)

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. BOB GOODLATTE FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 292

City State Zip Code
Roanoke VA 24002

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Bob Goodlatte

Category/
Type

Office Sought: House
 Senate
 President
State: VA District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2015

Transaction ID : D849

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. COLE FOR CONGRESS

Mailing Address P.O. Box 722256

City State Zip Code
Norman OK 73070

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Tom Cole

Category/
Type

Office Sought: House
 Senate
 President
State: OK District: 04

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2015

Transaction ID : D847

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Ryan Costello for Congress

Mailing Address P.O. Box 3154

City State Zip Code
West Chester PA 19381

Purpose of Disbursement
Contribution

011

Candidate Name

Ryan Costello

Category/
Type

Office Sought: House
 Senate
 President
State: PA District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 12 / 2015

Transaction ID : D846

Amount of Each Disbursement this Period

1000.00

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

2000.00

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

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

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

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. UPTON FOR ALL OF US

Mailing Address P.O. Box 490

City St. Joseph State MI Zip Code 49085

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Fred Upton

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MI District: 06

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2015

Transaction ID : D848

Amount of Each Disbursement this Period

5000.00

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

5000.00

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

7000.00

**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)

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. Friends of Dave Reed

Mailing Address P.O. Box 1440

City Indiana State PA Zip Code 15701

Purpose of Disbursement
Contribution - PA State Representative District 62

Candidate Name

Dave L Reed

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 62

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 19 / 2015

Transaction ID : D850

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Warren Kampf

Mailing Address P.O. Box 1439

City Paoli State PA Zip Code 19301

Purpose of Disbursement
Contribution - PA State Representative District 157

Candidate Name

Warren Kampf

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 19 / 2015

Transaction ID : D851

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

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)..... ▶

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

2000.00

2000.00