

**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="2016"/>		43236.05
(b) Cash on Hand at Beginning of Reporting Period.....	26374.93	
(c) Total Receipts (from Line 19)	2983.98	23622.86
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	29358.91	66858.91
7. Total Disbursements (from Line 31).....	2500.00	40000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	26858.91	26858.91
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:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Report Covering the Period: From: 07 / 01 / 2016 To: 07 / 31 / 2016

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).....	2301.98	14954.56
(ii) Unitemized	682.00	8668.30
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2983.98	23622.86
(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)	2983.98	23622.86
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))..... ▶	2983.98	23622.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2983.98	23622.86

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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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.....	1500.00	37500.00
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	1000.00	2500.00
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	40000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2500.00	40000.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	2983.98	23622.86
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2983.98	23622.86
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)

Full Name (Last, First, Middle Initial) A. Timothy Byrne		Date of Receipt MM / DD / YYYY 07 / 29 / 2016
Mailing Address 8050 Fair View Lane		Transaction ID : C237415
City Norristown	State PA	Zip Code 19403
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 170.00	
Name of Employer Endo Pharmaceuticals	Occupation Sr Dir Public Policy	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1190.00	* Payroll Deduction:

Full Name (Last, First, Middle Initial) B. Paula Clark		Date of Receipt MM / DD / YYYY 07 / 29 / 2016
Mailing Address 60 Andrew Court		Transaction ID : C237417
City Aston	State PA	Zip Code 19014
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer Endo Pharmaceuticals	Occupation Sr Dir, Regulatory Affairs Liaison	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	* Payroll Deduction:

Full Name (Last, First, Middle Initial) C. Robert Cobuzzi Jr.		Date of Receipt MM / DD / YYYY 07 / 29 / 2016
Mailing Address 1822 Masters Way		Transaction ID : C237418
City Chadds Ford	State PA	Zip Code 19317
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 120.00	
Name of Employer Endo Pharmaceuticals	Occupation President Endo Ventures Ltd.	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	* 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 7 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. Blaise Coleman		Date of Receipt MM / DD / YYYY 07 / 29 / 2016 Transaction ID : C237419
Mailing Address 12 Willing Way		Amount of Each Receipt this Period 30.00
City Malvern	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Endo Pharmaceuticals	Occupation SVP Financial Operations & Corporate I	* Payroll Deduction:
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Keri Delp		Date of Receipt MM / DD / YYYY 07 / 29 / 2016 Transaction ID : C237423
Mailing Address 634 W Cliveden St		Amount of Each Receipt this Period 100.00
City Philadelphia	State PA	Zip Code 19119
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Endo Pharmaceuticals	Occupation SVP Investor Relations & Corporate Aff	* Payroll Deduction:
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) C. Rajiv DeSilva		Date of Receipt MM / DD / YYYY 07 / 29 / 2016 Transaction ID : C237422
Mailing Address 120 Masons Way		Amount of Each Receipt this Period 416.00
City Newtown Square	State PA	Zip Code 19073
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Endo Pharmaceuticals	Occupation CEO and President	* Payroll Deduction:
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2912.00	

SUBTOTAL of Receipts This Page (optional).....▶	546.00
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)

A. Guy Donatiello
Full Name (Last, First, Middle Initial)
Mailing Address 321 North Ithan Ave
City Rosemont State PA Zip Code 19010
FEC ID number of contributing federal political committee. **C**
Name of Employer Endo Pharmaceuticals Occupation SVP Intellectual Property
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt **07 / 29 / 2016**
Transaction ID : C237425
Amount of Each Receipt this Period **60.00**
 Memo Item
* Payroll Deduction:

B. Jennifer Dubas
Full Name (Last, First, Middle Initial)
Mailing Address 315 R Glad Way
City Collegeville State PA Zip Code 19426
FEC ID number of contributing federal political committee. **C**
Name of Employer Endo Pharmaceuticals Occupation SVP & Assoc General Counsel
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **350.00**

Date of Receipt **07 / 29 / 2016**
Transaction ID : C237426
Amount of Each Receipt this Period **50.00**
 Memo Item
* Payroll Deduction:

C. Donald Gardner
Full Name (Last, First, Middle Initial)
Mailing Address 14803 S. 4th Dr.
City Phoenix State AZ Zip Code 85045
FEC ID number of contributing federal political committee. **C**
Name of Employer Endo Pharmaceutical Solutions, Inc. Occupation Specialty Sales Consultant - Urology
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **210.00**

Date of Receipt **07 / 29 / 2016**
Transaction ID : C237429
Amount of Each Receipt this Period **30.00**
 Memo Item
* Payroll Deduction:

SUBTOTAL of Receipts This Page (optional)..... **140.00**
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 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)

A. Brian Lortie
Full Name (Last, First, Middle Initial)
Mailing Address 10 Horseshoe Lane
City Paoli State PA Zip Code 19301
FEC ID number of contributing federal political committee. **C**
Name of Employer Endo Pharmaceuticals Occupation President Branded Pharmaceuticals
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **700.00**

Date of Receipt **07 / 29 / 2016**
Transaction ID : C237442
Amount of Each Receipt this Period **100.00**
 Memo Item
* Payroll Deduction:

B. Lorie Maicher
Full Name (Last, First, Middle Initial)
Mailing Address 152 Kelton Road
City West Grove State PA Zip Code 19390
FEC ID number of contributing federal political committee. **C**
Name of Employer Endo Pharmaceuticals Occupation Marketing Services Mgr
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **210.00**

Date of Receipt **07 / 29 / 2016**
Transaction ID : C237444
Amount of Each Receipt this Period **30.00**
 Memo Item
* Payroll Deduction:

C. Matthew Maletta
Full Name (Last, First, Middle Initial)
Mailing Address 314 Edgehill Road
City Wayne State PA Zip Code 19087
FEC ID number of contributing federal political committee. **C**
Name of Employer Endo Pharmaceuticals Occupation EVP Chief Legal Officer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1400.00**

Date of Receipt **07 / 29 / 2016**
Transaction ID : C237445
Amount of Each Receipt this Period **200.00**
 Memo Item
* Payroll Deduction:

SUBTOTAL of Receipts This Page (optional)..... **330.00**
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"/> 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)

A. James Manser
Full Name (Last, First, Middle Initial)

Mailing Address 1875 Rampart Lane

City Lansdale State PA Zip Code 19446

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

Name of Employer Endo Pharmaceuticals Occupation Dir State Government & External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : C237446

Amount of Each Receipt this Period
 150.00

Memo Item

* Payroll Deduction:

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 ▼ 1162.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : C237453

Amount of Each Receipt this Period
 166.00

Memo Item

* Payroll Deduction:

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

Mailing Address 927 Grandview Drive

City Exton State PA Zip Code 19341

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

Name of Employer Endo Pharmaceuticals Occupation Assistant Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : C237455

Amount of Each Receipt this Period
 30.00

Memo Item

* Payroll Deduction:

SUBTOTAL of Receipts This Page (optional).....	346.00
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)

A. Spencer Pyles
Full Name (Last, First, Middle Initial)
Mailing Address 12310 Stephens Charge Ct.
City Cypress State TX Zip Code 77433
FEC ID number of contributing federal political committee. **C**
Name of Employer Endo Pharmaceuticals Occupation Specialty District Sales Mgr
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **210.00**

Date of Receipt **07 / 29 / 2016**
Transaction ID : C237458
Amount of Each Receipt this Period **30.00**
 Memo Item
* Payroll Deduction:

B. Joseph Rosenthal
Full Name (Last, First, Middle Initial)
Mailing Address 1058 Harriman Court
City West Chester State PA Zip Code 19380
FEC ID number of contributing federal political committee. **C**
Name of Employer Endo Pharmaceuticals Occupation Director Business Development
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **210.00**

Date of Receipt **07 / 29 / 2016**
Transaction ID : C237460
Amount of Each Receipt this Period **30.00**
 Memo Item
* Payroll Deduction:

C. Robert Rush
Full Name (Last, First, Middle Initial)
Mailing Address 2006 Fairfield Drive
City Wilmington State DE Zip Code 19810
FEC ID number of contributing federal political committee. **C**
Name of Employer Endo Pharmaceuticals Occupation SVP & Chief Operations Officer, U.S. B
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **420.00**

Date of Receipt **07 / 29 / 2016**
Transaction ID : C237462
Amount of Each Receipt this Period **60.00**
 Memo Item
* Payroll Deduction:

SUBTOTAL of Receipts This Page (optional).....	120.00
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 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. Andrew Scott
Full Name (Last, First, Middle Initial)

Mailing Address 1834 Calvert Street NW
Apt 5

City Washington State DC Zip Code 20009

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

Name of Employer Endo Pharmaceuticals Occupation Government Affairs Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 29 / 2016
Transaction ID : C237464

Amount of Each Receipt this Period 30.00

Memo Item

* Payroll Deduction:

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

Mailing Address 9630 Eagle Ridge Dr.

City Bethesda State MD Zip Code 20817

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

Name of Employer Endo Pharmaceuticals Occupation SVP Tax

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1166.62

Date of Receipt 07 / 29 / 2016
Transaction ID : C237465

Amount of Each Receipt this Period 166.66

Memo Item

* Payroll Deduction:

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

Mailing Address 2117 Pine Street

City Philadelphia State PA Zip Code 19103

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

Name of Employer Endo Pharmaceuticals Occupation EVP & Chief Compliance Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 583.24

Date of Receipt 07 / 29 / 2016
Transaction ID : C237467

Amount of Each Receipt this Period 83.32

Memo Item

* Payroll Deduction:

SUBTOTAL of Receipts This Page (optional).....▶	279.98
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 13 OF 15
(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)
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 ▼ 1400.00

Date of Receipt 07 / 29 / 2016
Transaction ID : C237468
Amount of Each Receipt this Period 200.00
 Memo Item
* 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
Amount of Each Receipt this Period
 Memo Item

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
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	2301.98

**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. COLE FOR CONGRESS

Mailing Address P.O. Box 722256

City Norman State OK Zip Code 73070

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Tom Cole

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OK District: 04

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : D961

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MIKE BISHOP FOR CONGRESS

Mailing Address PO BOX 1148

City BRIGHTON State MI Zip Code 48116

Purpose of Disbursement
Contribution

011

Candidate Name

MIKE BISHOP

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MI District: 08

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : D960

Amount of Each Disbursement this Period

1000.00

Memo Item

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 M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

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

1500.00

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

1500.00

**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

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)

Full Name (Last, First, Middle Initial)

A. Friends of Andy Dinniman

Mailing Address 471 Spruce Drive

City Exton State PA Zip Code 19341

Purpose of Disbursement
Contribution - PA State Senate District 19

Candidate Name

Andrew Dinniman

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 19

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : D962

Amount of Each Disbursement this Period

1000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

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

Memo Item

C.

Full Name (Last, First, Middle Initial)

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

Memo Item

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

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

1000.00

1000.00