

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Endo Pharmaceuticals Inc Political Action Committee (Endo PAC)

ADDRESS (number and street) 100 Endo Boulevard Check if different than previously reported. (ACC) Chadds Ford PA 19317

2. FEC IDENTIFICATION NUMBER C00452052 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 09 01 2009 through 09 30 2009

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 Joseph Rosenthal

Signature of Treasurer Electronically Filed by Joseph Rosenthal Date 10 20 2009

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

Table with 7 columns and 1 row for Office Use Only

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Endo Pharmaceuticals Inc Political Action Committee (Endo PAC)

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 9 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 9 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |          |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|----------|
| 6. (a) Cash on Hand<br>January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 9 |  | 21706.00 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |          |
| 2   | 0                       | 0                                 | 9 |   |   |   |   |   |  |          |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 42099.64                |                                   |   |   |   |   |   |   |  |          |
| (c) Total Receipts (from Line 19) .....   | 4527.66                 | 54021.30                          |   |   |   |   |   |   |  |          |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 46627.30                | 75727.30                          |   |   |   |   |   |   |  |          |
| 7. Total Disbursements (from Line 31) .....   | 7500.00                 | 36600.00                          |   |   |   |   |   |   |  |          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 39127.30                | 39127.30                          |   |   |   |   |   |   |  |          |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |          |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>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:    To:

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  |                               |                                   |
| (i) Itemized (use Schedule A) .....  | 3014.66                       | 34874.64                          |
| (ii) Unitemized .....  | 1513.00                       | 19146.66                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 4527.66                       | 54021.30                          |
| (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) .....     | 4527.66                       | 54021.30                          |
| 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 Transfer (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)) .....                          | 4527.66                       | 54021.30                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 4527.66                       | 54021.30                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

| <b>II. DISBURSEMENTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 21. Operating Expenditures:  |                                       |   |
| (a) Shared 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.....         | 5000.00                               | 29000.00                                  |
| 24. Independent Expenditure (use Schedule E) .....   | 0.00                                  | 0.00                                      |
| 25. Coordinated Expenditures Made by Party Committees (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.....   | 2500.00                               | 7600.00                                   |
| 30. Federal Election Activity (2 U.S.C 431(20))  |                                       |   |
| (a) Shared 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))..       | 7500.00                               | 36600.00                                  |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 7500.00                               | 36600.00                                  |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 4527.66                       | 54021.30                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 4527.66                       | 54021.30                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 0.00                          | 0.00                              |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(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 / 19  
(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)  
Endo Pharmaceuticals Inc Political Action Committee (Endo PAC)

**A.** Full Name (Last, First, Middle Initial)  
Karen Adler  
Mailing Address P.O. Box 689  
City State Zip Code  
Westtown PA 19395  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Endo Pharmaceuticals Inc Occupation VP, Finance & Treasurer  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 756.00  
Date of Receipt 09 / 30 / 2009  
Transaction ID: SA11AI.5466  
Amount of Each Receipt this Period 84.00  
Payroll deduction of \$42.-00 semimonthly

**B.** Full Name (Last, First, Middle Initial)  
Lynnel Anderson  
Mailing Address 424 North Palm Drive #103  
City State Zip Code  
Beverly Hills CA 90210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Endo Pharmaceuticals Inc Occupation Regional Director  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00  
Date of Receipt 09 / 30 / 2009  
Transaction ID: SA11AI.5468  
Amount of Each Receipt this Period 50.00  
Payroll deduction of \$25.-00 semimonthly

**C.** Full Name (Last, First, Middle Initial)  
Charles Bartucz  
Mailing Address 212B 55th Street  
City State Zip Code  
Kenosha WI 53140  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Endo Pharmaceuticals Inc Occupation Pharmaceutical Sales Representative  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 378.00  
Date of Receipt 09 / 30 / 2009  
Transaction ID: SA11AI.5473  
Amount of Each Receipt this Period 42.00  
Payroll deduction of \$21.-00 semimonthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 176.00  
**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 7 / 19  
(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.**

Full Name (Last, First, Middle Initial)  
Demir Bingol

Mailing Address 107 Merrymet Farm Drive

City State Zip Code  
Kennett Square PA 19348

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

Name of Employer: Endo Pharmaceuticals Inc  
Occupation: Sr. Product Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 374.00

Date of Receipt: 09 / 30 / 2009  
Transaction ID: SA11AI.5478  
Amount of Each Receipt this Period: 44.00  
Payroll deduction of \$22.-00 semimonthly

**B.**

Full Name (Last, First, Middle Initial)  
Timothy Byrne

Mailing Address 8050 Fair View Lane

City State Zip Code  
Norristown PA 19403

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

Name of Employer: Endo Pharmaceuticals Inc  
Occupation: Public Policy Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt: 09 / 30 / 2009  
Transaction ID: SA11AI.5488  
Amount of Each Receipt this Period: 250.00  
Payroll deduction of \$125.-00 semimonthly

**C.**

Full Name (Last, First, Middle Initial)  
Michele Campbell

Mailing Address 3 Rivendell Court

City State Zip Code  
Hockessin DE 19707

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

Name of Employer: Endo Pharmaceuticals Inc  
Occupation: VP, Legal Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 810.00

Date of Receipt: 09 / 30 / 2009  
Transaction ID: SA11AI.5489  
Amount of Each Receipt this Period: 90.00  
Payroll deduction of \$45.-00 semimonthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 384.00

**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 8 / 19  
(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.**

Full Name (Last, First, Middle Initial)  
Robert Cobuzzi, Jr.

Mailing Address 1822 Masters Way

City State Zip Code  
Chadds Ford PA 19317

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

Name of Employer: Endo Pharmaceuticals Inc  
Occupation: VP, Corporate Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 09 / 30 / 2009  
Transaction ID: SA11AI.5562  
Amount of Each Receipt this Period: 60.00  
Payroll deduction of \$30.-00 semimonthly

**B.**

Full Name (Last, First, Middle Initial)  
Colleen Craven

Mailing Address 21 Dorset Road

City State Zip Code  
Glen Mills PA 19342

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

Name of Employer: Endo Pharmaceuticals Inc  
Occupation: VP, Corporate Compliance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 30 / 2009  
Transaction ID: SA11AI.5499  
Amount of Each Receipt this Period: 100.00  
Payroll deduction of \$50.-00 semimonthly

**C.**

Full Name (Last, First, Middle Initial)  
Christine Davis

Mailing Address 100 Endo Boulevard

City State Zip Code  
Chadds Ford PA 19317

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

Name of Employer: Endo Pharmaceuticals Inc  
Occupation: Vice President, Tax

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: 09 / 30 / 2009  
Transaction ID: SA11AI.5500  
Amount of Each Receipt this Period: 60.00  
Payroll deduction of \$30.-00 semimonthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **220.00**

**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 / 19  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Endo Pharmaceuticals Inc Political Action Committee (Endo PAC)

**A.** Full Name (Last, First, Middle Initial)  
Bert deJong

Mailing Address 203 Rawles Run Lane

City State Zip Code  
Bryn Mawr PA 19010

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

Name of Employer: Endo Pharmaceuticals Inc   Occupation: Sr. Director, Medical Affairs

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 09 / 30 / 2009  
**Transaction ID:** SA11AI.5501  
 Amount of Each Receipt this Period: 100.00  
 Payroll deduction of \$50.-00 semimonthly

**B.** Full Name (Last, First, Middle Initial)  
Guy Donatiello

Mailing Address 321 North Ithan Avenue

City State Zip Code  
Rosemont PA 19010

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

Name of Employer: Endo Pharmaceuticals Inc   Occupation: VP, Intellectual Property

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 09 / 30 / 2009  
**Transaction ID:** SA11AI.5503  
 Amount of Each Receipt this Period: 50.00  
 Payroll deduction of \$25.-00 semimonthly

**C.** Full Name (Last, First, Middle Initial)  
Maricel Foley

Mailing Address 13122 South West 40th Street

City State Zip Code  
Davie FL 33330

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

Name of Employer: Endo Pharmaceuticals Inc   Occupation: District Manager

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt: 09 / 30 / 2009  
**Transaction ID:** SA11AI.5506  
 Amount of Each Receipt this Period: 50.00  
 Payroll deduction of \$25.-00 semimonthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 200.00

**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 10 / 19  
(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.**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br>Ivan Gergel  |   | Date of Receipt<br>MM / DD / YYYY<br>09 / 30 / 2009 |
| Mailing Address 381 Castlewood Drive  |   | <b>Transaction ID:</b> SA11AI.5509                  |
| City<br>Devon   | State<br>PA                               | Zip Code<br>19333                                   |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer<br>Endo Pharmaceuticals Inc  | Occupation<br>EVP, Research & Development | Payroll deduction of \$125.-<br>.00 semimonthly     |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1500.00       |   |

**B.**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br>Ron Gerson   |   | Date of Receipt<br>MM / DD / YYYY<br>09 / 30 / 2009 |
| Mailing Address 520 Ridge Drive   |   | <b>Transaction ID:</b> SA11AI.5510                  |
| City<br>Lincoln University  | State<br>PA                             | Zip Code<br>19352                                   |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>30.00         |
| Name of Employer<br>Endo Pharmaceuticals Inc  | Occupation<br>VP, Scientific Evaluation | Payroll deduction of \$15.-<br>00 semimonthly       |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>270.00      |   |

**C.**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br>Sandeep Gupta  |  | Date of Receipt<br>MM / DD / YYYY<br>09 / 30 / 2009 |
| Mailing Address 6 Birch Drive   |  | <b>Transaction ID:</b> SA11AI.5513                  |
| City<br>Plainsboro  | State<br>NJ                                      | Zip Code<br>08536                                   |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>166.66        |
| Name of Employer<br>Endo Pharmaceuticals Inc  | Occupation<br>SVP, Discovery & Early Development | Payroll deduction of \$83.-<br>33 semimonthly       |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>833.30               |   |

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 446.66 |
| <b>TOTAL</b> 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 / 19                 |
|   | <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)

|   |   |   |  |
|---|---|---|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Sterling Ivson, III      |   | Date of Receipt  |
|   | Mailing Address 29 Morgan Hollow Way                                |   | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y |
|   | City  | State                                   | Zip Code   |
|   | Landenberg  | PA                                      | 19350  |
|   | FEC ID number of contributing federal political committee. <b>C</b> |   | <b>Transaction ID:</b> SA11AI.5516   |
| Name of Employer<br>Endo Pharmaceuticals Inc  |   | Occupation<br>Director, Human Resources | Amount of Each Receipt this Period   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>450.00      | <input type="text"/> 50.00   |
|   |   |   | Payroll deduction of \$25.-00 semimonthly  |

|   |   |  |  |
|---|---|--|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Maria Lane               |  | Date of Receipt  |
|   | Mailing Address 131 Mallory Lane                                    |  | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y |
|   | City  | State                                    | Zip Code   |
|   | Oxford  | PA                                       | 19363  |
|   | FEC ID number of contributing federal political committee. <b>C</b> |  | <b>Transaction ID:</b> SA11AI.5529   |
| Name of Employer<br>Endo Pharmaceuticals Inc  |   | Occupation<br>Director, Speciality Sales | Amount of Each Receipt this Period   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>450.00       | <input type="text"/> 50.00   |
|   |   |  | Payroll deduction of \$25.-00 semimonthly  |

|   |   |  |  |
|---|---|--|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Joanne Manidis           |  | Date of Receipt  |
|   | Mailing Address 1340 South Concord Road                             |  | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y |
|   | City  | State                                      | Zip Code   |
|   | West Chester  | PA   | 19382  |
|   | FEC ID number of contributing federal political committee. <b>C</b> |  | <b>Transaction ID:</b> SA11AI.5533   |
| Name of Employer<br>Endo Pharmaceuticals Inc  |   | Occupation<br>Sr. Director, Sales Training | Amount of Each Receipt this Period   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>450.00         | <input type="text"/> 50.00   |
|   |   |  | Payroll deduction of \$25.-00 semimonthly  |

|  |                             |
|--|-----------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text"/> 150.00 |
| <b>TOTAL</b> 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 12 / 19                 |
|   | <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)

|           |   |  |
|-----------|---|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Caroline Manogue   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>09 / 30 / 2009 |
|           | Mailing Address 302 Keithwood Road  | <b>Transaction ID:</b> SA11AI.5534                         |
|           | City Wynnewood State PA Zip Code 19096  | Amount of Each Receipt this Period<br>416.00               |
|           | FEC ID number of contributing federal political committee. <b>C</b>   | Payroll deduction of \$208.-00 semimonthly                 |
|           | Name of Employer Endo Pharmaceuticals Inc Occupation EVP, Chief Legal Officer & Secretary<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>2288.00 |  |

|           |  |  |
|-----------|--|--|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Kevin McCaughan   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>09 / 30 / 2009 |
|           | Mailing Address 874 Empress Road   | <b>Transaction ID:</b> SA11AI.5539                         |
|           | City West Chester State PA Zip Code 19382  | Amount of Each Receipt this Period<br>100.00               |
|           | FEC ID number of contributing federal political committee. <b>C</b>  | Payroll deduction of \$50.-00 semimonthly                  |
|           | Name of Employer Endo Pharmaceuticals Inc Occupation VP, Commercial Finance<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>900.00 |  |

|           |  |  |
|-----------|--|--|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Brian Munroe  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>09 / 30 / 2009 |
|           | Mailing Address 9447 Brenner Court   | <b>Transaction ID:</b> SA11AI.5543                         |
|           | City Vienna State VA Zip Code 22180  | Amount of Each Receipt this Period<br>84.00                |
|           | FEC ID number of contributing federal political committee. <b>C</b>  | Payroll deduction of \$42.-00 semimonthly                  |
|           | Name of Employer Endo Pharmaceuticals Inc Occupation Vice President, Government Affairs<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>714.00 |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>600.00</b> |
| <b>TOTAL</b> 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 / 19  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Endo Pharmaceuticals Inc Political Action Committee (Endo PAC)

**A.** Full Name (Last, First, Middle Initial)  
Jonathan Neely  
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 Inc Occupation Associate Director, Investor Relations  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00  
Date of Receipt 09 / 30 / 2009  
Transaction ID: SA11AI.5544  
Amount of Each Receipt this Period 100.00  
Payroll deduction of \$50.-00 semimonthly

**B.** Full Name (Last, First, Middle Initial)  
Kevin O'Connell  
Mailing Address 101 Cloverly Lane  
City West Chester State PA Zip Code 19380  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Endo Pharmaceuticals Inc Occupation Associate Director, Sales Training  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00  
Date of Receipt 09 / 30 / 2009  
Transaction ID: SA11AI.5549  
Amount of Each Receipt this Period 50.00  
Payroll deduction of \$25.-00 semimonthly

**C.** Full Name (Last, First, Middle Initial)  
Colleen Perrin  
Mailing Address 993 Meadowview Lane  
City West Chester State PA Zip Code 19382  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Endo Pharmaceuticals Inc Occupation Sr. Director, Internal Communications  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.00  
Date of Receipt 09 / 30 / 2009  
Transaction ID: SA11AI.5553  
Amount of Each Receipt this Period 50.00  
Payroll deduction of \$25.-00 semimonthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 200.00  
**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 14 / 19  
(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.**

Full Name (Last, First, Middle Initial)  
Kenneth Price

Mailing Address 15213 West 139th Terrace

City Olathe State KS Zip Code 66062

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

Name of Employer Endo Pharmaceuticals Inc Occupation Regional Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2009

**Transaction ID:** SA11AI.5557

Amount of Each Receipt this Period 50.00

Payroll deduction of \$25.-00 semimonthly

**B.**

Full Name (Last, First, Middle Initial)  
Mark Schauwecker

Mailing Address 129 Birchwood Drive

City West Chester State PA Zip Code 19380

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

Name of Employer Endo Pharmaceuticals Inc Occupation Associate Director, Internal Reporting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2009

**Transaction ID:** SA11AI.5572

Amount of Each Receipt this Period 50.00

Payroll deduction of \$25.-00 semimonthly

**C.**

Full Name (Last, First, Middle Initial)  
Valerie Silverman

Mailing Address 9337 North West 10th Street

City Plantation State FL Zip Code 33322

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

Name of Employer Endo Pharmaceuticals Inc Occupation District Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2009

**Transaction ID:** SA11AI.5577

Amount of Each Receipt this Period 50.00

Payroll deduction of \$25.-00 semimonthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00

**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 15 / 19  
(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.**

Full Name (Last, First, Middle Initial)  
Cory Stewart

Mailing Address PMB 312 56 North Plank Road #1

City State Zip Code  
Newburgh NY 12550

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

Name of Employer: Endo Pharmaceuticals Inc  
Occupation: Account Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 09 / 30 / 2009  
Transaction ID: SA11AI.5579  
Amount of Each Receipt this Period: 50.00  
Payroll deduction of \$25.-00 semimonthly

**B.**

Full Name (Last, First, Middle Initial)  
Edward Sweeney

Mailing Address 15 Valley Lane

City State Zip Code  
Mullica Hill NJ 08062

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

Name of Employer: Endo Pharmaceuticals Inc  
Occupation: Vice President, Controller

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 09 / 30 / 2009  
Transaction ID: SA11AI.5582  
Amount of Each Receipt this Period: 30.00  
Payroll deduction of \$15.-00 semimonthly

**C.**

Full Name (Last, First, Middle Initial)  
Gregory Thomas

Mailing Address 1522 Sylvan Drive

City State Zip Code  
West Chester PA 19380

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

Name of Employer: Endo Pharmaceuticals Inc  
Occupation: Sr. Director, State Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 09 / 30 / 2009  
Transaction ID: SA11AI.5585  
Amount of Each Receipt this Period: 100.00  
Payroll deduction of \$50.-00 semimonthly

**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 16 / 19  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Endo Pharmaceuticals Inc Political Action Committee (Endo PAC)

**A.** Full Name (Last, First, Middle Initial)  
Katie Topolewski

Mailing Address 125 Airdale Road

City State Zip Code  
Rosemont PA 19010

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

Name of Employer: Endo Pharmaceuticals Inc  
Occupation: Director, Corporate Compliance & Business

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 09 / 30 / 2009  
**Transaction ID:** SA11AI.5586  
 Amount of Each Receipt this Period: 50.00  
 Payroll deduction of \$25.-00 semimonthly

**B.** Full Name (Last, First, Middle Initial)  
Catherine Wunderlich

Mailing Address 1 MacLeod Pond Road

City State Zip Code  
Glenmoore PA 19343

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

Name of Employer: Endo Pharmaceuticals Inc  
Occupation: Human Resources Business Partner

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt: 09 / 30 / 2009  
**Transaction ID:** SA11AI.5591  
 Amount of Each Receipt this Period: 208.00  
 Payroll deduction of \$208.-00 semimonthly

**C.** Full Name (Last, First, Middle Initial)  
Frank Yuen

Mailing Address 110-20 71st Avenue

City State Zip Code  
Forest Hills NY 11375

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

Name of Employer: Endo Pharmaceuticals Inc  
Occupation: Clinical Affairs Manager

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 30 / 2009  
**Transaction ID:** SA11AI.5595  
 Amount of Each Receipt this Period: 50.00  
 Payroll deduction of \$25.-00 semimonthly

**SUBTOTAL** of Receipts This Page (optional) ..... ► **308.00**

**TOTAL** This Period (last page this line number only) ..... ► **3014.66**

# 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)

|   |  |
|---|--|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Doyle for Congress Committee<br><hr/> Mailing Address P.O. Box 17426<br><hr/> City Pittsburgh State PA Zip Code 15235<br><hr/> Purpose of Disbursement Contribution<br>Candidate Name Mike Doyle<br><hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: PA District: 14<br><hr/> Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼         | Transaction ID: SB23.5600<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 9 / 1 1 / 2 0 0 9  |
|   | Amount of Each Disbursement this Period<br>1000.00   |
|   | Category/Type<br>011   |
|   | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>Friends of Carolyn McCarthy<br><hr/> Mailing Address 38 Ivy Street, SE<br><hr/> City Washington State DC Zip Code 20003<br><hr/> Purpose of Disbursement Contribution<br>Candidate Name CAROLYN MCCARTHY<br><hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NY District: 04<br><hr/> Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.5606<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 9 / 2 2 / 2 0 0 9  |
|   | Amount of Each Disbursement this Period<br>1000.00   |
|   | Category/Type<br>011   |
|   | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>Lungren for Congress<br><hr/> Mailing Address 1203 Porner Road<br><hr/> City Alexandria State VA Zip Code 22314<br><hr/> Purpose of Disbursement Contribution<br>Candidate Name Dan Lungren<br><hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: CA District: 03<br><hr/> Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼              | Transaction ID: SB23.5607<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 9 / 2 2 / 2 0 0 9  |
|   | Amount of Each Disbursement this Period<br>1000.00   |
|   | Category/Type<br>011   |
|   | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 3000.00     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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)

A.

Full Name (Last, First, Middle Initial)  
Matheson for Congress

Mailing Address P.O. Box 636

City Annandale State VA Zip Code 22003

Purpose of Disbursement  
Contribution

Candidate Name  
Jim Matheson

Office Sought:  House  
 Senate  
 President

State: UT District: 02

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5603  
Date of Disbursement

09 / 11 / 2009

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

B.

Full Name (Last, First, Middle Initial)  
Pete King for Congress Committee

Mailing Address 1526 17th Street NW, # 101

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Contribution

Candidate Name  
Peter King

Office Sought:  House  
 Senate  
 President

State: NY District: 03

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5610  
Date of Disbursement

09 / 28 / 2009

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

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

2000.00

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

5000.00

**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)

PAGE 19 / 19

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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)

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Friends of Jake Corman  | Transaction ID: SB29.5597<br>Date of Disbursement<br>09 / 11 / 2009  |
|    | Mailing Address P.O. Box 421   | Amount of Each Disbursement this Period<br>1000.00   |
|    | City Bellefonte State PA Zip Code 16823  |  |
|    | Purpose of Disbursement<br>Contribution - PA Senate District 34  | 011<br>Category/<br>Type   |
|    | Candidate Name<br>Jake Corman  |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| B. | Full Name (Last, First, Middle Initial)<br>Friends of Steven Barrar  | Transaction ID: SB29.5596<br>Date of Disbursement<br>09 / 11 / 2009  |
|    | Mailing Address 12 Bernard Street  | Amount of Each Disbursement this Period<br>1500.00   |
|    | City Aston State PA Zip Code 19014   |  |
|    | Purpose of Disbursement<br>Contribution - PA House District 160  | 011<br>Category/<br>Type   |
|    | Candidate Name<br>Steven Barrar  |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

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

2500.00

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

2500.00