

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

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

FOR LINE NUMBER: PAGE 24 OF 42

(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)

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

A. Kolaras, Thomas, , ,

Mailing Address 1400 Atwater Drive

City
MalvernState
PAZip Code
19355FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Endo PharmaceuticalsOccupation (for Individual)
SVP, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

836.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2019

Transaction ID : C397079

Amount of Each Receipt this Period

76.00

☐ Memo Item

* Payroll Deduction:

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

B. Lawson, John, , ,

Mailing Address 1400 Atwater Drive

City
MalvernState
PAZip Code
19355FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Endo PharmaceuticalsOccupation (for Individual)
Senior Director, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2019

Transaction ID : C397080

Amount of Each Receipt this Period

38.00

☐ Memo Item

* Payroll Deduction:

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

C. Leone, Daniel, , ,

Mailing Address 6 Ram Ridge Road

City
Chestnut RidgeState
NYZip Code
10977FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Par PharmaceuticalOccupation (for Individual)
Sr Dir, Contract Manufacturing Operati

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 11 / 2019

Transaction ID : C396357

Amount of Each Receipt this Period

19.00

☐ Memo Item

* Payroll Deduction:

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

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

133.00