Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC) 1400 Atwater Drive ADDRESS (number and street) (Check if address is changed) Malvern 19355 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS thorpe.ruth@endo.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 08 2021 C00452052 FEC IDENTIFICATION NUMBER 3. IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Thorpe, Ruth, , , Type or Print Name of Treasurer Thorpe, Ruth, , , [Electronically Filed] 08 2021 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE OF C	OMMITTEE • Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Corinformation below.)	nplete the candidate
Name of Candidate		
Candidate Party Affiliati	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Con	nmittee: (National, State	(Democratic,
(d)	This committee is a or subordinate) committee of the	Republican, etc.) Party
Political A	ction Committee (PAC):	
(e) x	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	raising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t	
(h)	committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for t	
`′ Ц	committees/organizations, none of which is an authorized committee of a federal candidate.	
Com	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee	Name		
Endo Pharm	aceuticals Inc Political	Action Committee	(ENDO PAC)
6. Name of Any Conne	cted Organization, Affiliated Committee, J	oint Fundraising Representative, or L	eadership PAC Sponsor
Endo Pharmaceut	icals Inc.		
	1400 Atwater Drive		
Mailing Address			
	. Malvern	PA . 1	
	IVIAIVEITI		
	CITY	STATE	ZIP CODE
Relationship: 🗶 Cor	nnected Organization Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor
			_
Custodian of Records books and records.	s: Identify by name, address (phone number	· optional) and position of the persor	n in possession of committee
Mar	nser, James, , ,		
Full Name	,1400 Atwater Drive		
Mailing Address	1400 Atwact Blive		
	Malvern	PA 1	9355
Title or Position	CITY	STATE	ZIP CODE
PAC Chair		Telephone number 484	_ 216 7726
	me and address (phone number optional) (e.g., assistant treasurer).	of the treasurer of the committee; and	the name and address of
Full Name Tho of Treasurer	rpe, Ruth, , ,		
Mailing Address	1400 Atwater Drive		
J			
	Malvern		9355
	CITY	STATE	ZIP CODE
Title or Position , Treasurer	· · · · · · · · · · · · · · · · · · ·	J 484	216 5510
		Telephone number	

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Full Name of Designated	Manser, James, , ,	
Agent	1400 Atwater Drive	
Mailing Address		
	Malvern PA 19355	[-] [
	CITY STATE	ZIP CODE
Title or Position PAC Chair		216 7726
Name of Bank,	oxes or maintains funds. Depository, etc. Wells Fargo	
Mailina Address	,77 Lancaster Avenue	
Mailing Address	,77 Lancaster Avenue	
Mailing Address	,77 Lancaster Avenue	
Mailing Address	77 Lancaster Avenue	ZIP CODE
Mailing Address Name of Bank,	77 Lancaster Avenue Malvern PA 19355 CITY STATE	ZIP CODE
	77 Lancaster Avenue Malvern PA 19355 CITY STATE	ZIP CODE
	77 Lancaster Avenue Malvern PA 19355 CITY STATE	ZIP CODE
Name of Bank,	77 Lancaster Avenue Malvern PA 19355 CITY STATE	ZIP CODE
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