Edgar Filing: Holveck David - Form 4

Holveck Dav Form 4											
August 26, 2									OMB AF	PROVAL	
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 cc Form 5 obligation may com See Instr 1(b).	ger STA 16. or File ^{ons} Sectio	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section								Expires:January 31, 2005Estimated average burden hours per response0.5	
(Print or Type]	Responses)										
			2. Issuer Name and Ticker or Trading Symbol ENDO PHARMACEUTICALS HOLDINGS INC [ENDP]				-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) C/O ENDO PHARMAC BOULEVA	CEUTICAL	(Middle) S, 100 ENDO	3. Date of (Month/E 08/25/2	-	ransaction			X Director X Officer (give below) Pres		Owner er (specify	
				4. If Amendment, Date Original Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
CHADDS H	FORD, PA	19317						Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative	Secu	rities Acqu	uired, Disposed of,	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)		on Date 2A. Deen /Year) Executio any (Month/I		Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3, Amount	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock, par value, \$.01 per share	08/25/201	1		Р	8,200	А	\$ 30.301 (1)	15,522	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Edgar Filing: Holveck David - Form 4

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Unde Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
T. S. T. T. T. T. T. T. T.	Director	10% Owner	Officer	Other			
Holveck David C/O ENDO PHARMACEUTICALS 100 ENDO BOULEVARD CHADDS FORD, PA 19317	Х	President & CEO					
Signatures							
/s/ Caroline B. Manogue, by power of attorney	f 08/26/2011						
**Signature of Reporting Person		Date	;				

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) This represents the market price per share of Mr. Holveck's common stock purchases on August 25, 2011.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.