

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

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="2014"/>	<input type="text" value="50321.10"/>	<input type="text" value="50321.10"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="39017.85"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4376.00"/>	<input type="text" value="100072.75"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="43393.85"/>	<input type="text" value="150393.85"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="111.25"/>	<input type="text" value="107111.25"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="43282.60"/>	<input type="text" value="43282.60"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

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).....	3624.00	82911.25
(ii) Unitemized	752.00	17161.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4376.00	100072.75
(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)	4376.00	100072.75
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))..... ▶	4376.00	100072.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4376.00	100072.75

DETAILED SUMMARY PAGE
of Disbursements

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.....	0.00	104500.00
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	111.25	2611.25
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)) ..	111.25	107111.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	111.25	107111.25

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	4376.00	100072.75
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4376.00	100072.75
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 16
<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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

A. Galen Smith
Full Name (Last, First, Middle Initial)

Mailing Address 1214 Brook Dr

City State Zip Code
Allen TX 75002-5083

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

Name of Employer Occupation
St. Jude Medical Senior Principal Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
11 / 24 / 2014

Transaction ID : PR53750508143

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

B. Ann Graves
Full Name (Last, First, Middle Initial)

Mailing Address 1455 Clippership Court

City State Zip Code
Woodbury MN 55125-8564

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

Name of Employer Occupation
St. Jude Medical VP, Regulatory

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1575.00**

Date of Receipt
11 / 24 / 2014

Transaction ID : PR53750788143

Amount of Each Receipt this Period
225.00

P/R Deduction (\$75.00 Bi-Weekly)

C. Robert Herrboldt
Full Name (Last, First, Middle Initial)

Mailing Address 5280 Parell Ave NE

City State Zip Code
Saint Michael MN 55376-9000

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

Name of Employer Occupation
St. Jude Medical Engineer Sr, Controls

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
11 / 24 / 2014

Transaction ID : PR53751078143

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	285.00
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 16
	<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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Bradley Huss			Date of Receipt
Mailing Address 1501 Heron Drive			<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : PR53753818143
Chanhassen	MN	55317-8530	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="30.00"/>
Name of Employer	Occupation		P/R Deduction (\$10.00 Bi-Weekly)
St. Jude Medical	Manager Sr, R&D Core Team		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
	<input type="text" value="210.00"/>		

Full Name (Last, First, Middle Initial) B. Atul Sinha			Date of Receipt
Mailing Address 1828 113th Court NE			<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : PR53754278143
Blaine	MN	55449-5484	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="75.00"/>
Name of Employer	Occupation		P/R Deduction (\$25.00 Bi-Weekly)
St. Jude Medical	Director, Quality		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
	<input type="text" value="525.00"/>		

Full Name (Last, First, Middle Initial) C. Bradley Roberts			Date of Receipt
Mailing Address 1553 Sherman Lake Ct			<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : PR53754618143
Lino Lakes	MN	55038-9630	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="75.00"/>
Name of Employer	Occupation		P/R Deduction (\$25.00 Bi-Weekly)
St. Jude Medical	Vice President, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
	<input type="text" value="500.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="180.00"/>
TOTAL 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: PAGE 8 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Brenda Inman

Mailing Address 4260 Lynfield Lane

City San Jose State CA Zip Code 95136-1622

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

Name of Employer St. Jude Medical Occupation Manager, Localization

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
11 / 24 / 2014
Transaction ID : PR53755268143

Amount of Each Receipt this Period
75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. John Davis

Mailing Address 10375 E. Texas Sage Ln.

City Scottsdale State AZ Zip Code 85255-8505

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

Name of Employer St. Jude Medical Occupation Director/Plant Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
11 / 24 / 2014
Transaction ID : PR53760808143

Amount of Each Receipt this Period
75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Maria Hernandez

Mailing Address 37735 Grant Court

City Palmdale State CA Zip Code 93552-3950

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

Name of Employer St. Jude Medical Occupation Supv, Sr Production

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt
11 / 24 / 2014
Transaction ID : PR53762468143

Amount of Each Receipt this Period
48.00

P/R Deduction (\$16.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ► **198.00**

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 16
<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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Werner Hafelfinger		Date of Receipt 11 / 24 / 2014 Transaction ID : PR53763278143
Mailing Address 5508 Via Mira Flores		Amount of Each Receipt this Period 15.00
City Thousand Oaks	State CA	Zip Code 91320-6883
FEC ID number of contributing federal political committee. C		P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer St. Jude Medical	Occupation VP, Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. Jeffrey Dallager		Date of Receipt 11 / 24 / 2014 Transaction ID : PR53764748143
Mailing Address 6918 132nd Street		Amount of Each Receipt this Period 60.00
City Hugo	State MN	Zip Code 55038-5410
FEC ID number of contributing federal political committee. C		P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer St. Jude Medical	Occupation Sr. Vice President Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. Steven Hill		Date of Receipt 11 / 24 / 2014 Transaction ID : PR53766378143
Mailing Address 12933 Monticello Lane		Amount of Each Receipt this Period 75.00
City Champlin	State MN	Zip Code 55316-1265
FEC ID number of contributing federal political committee. C		P/R Deduction (\$25.00 Bi-Weekly)
Name of Employer St. Jude Medical	Occupation Manager, eDiscovery & Investigations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

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: (check only one)	PAGE 10 OF 16
	<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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

A. Lisa Schoening
Full Name (Last, First, Middle Initial)

Mailing Address 9902 Jandel Ave Ne

City Monticello State MN Zip Code 55362-4316

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

Name of Employer St. Jude Medical Occupation Leader, HR Business Partner

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
 11 / 24 / 2014
Transaction ID : PR53767318143

Amount of Each Receipt this Period
150.00

P/R Deduction (\$50.00 Bi-Weekly)

B. Donald Zurbay
Full Name (Last, First, Middle Initial)

Mailing Address 10457 Scott Ave N

City Brooklyn Park State MN Zip Code 55443-5428

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

Name of Employer St. Jude Medical Occupation VP, Finance & CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2014
Transaction ID : PR53767398143

Amount of Each Receipt this Period
150.00

P/R Deduction (\$50.00 Bi-Weekly)

C. Jeffry Fecho
Full Name (Last, First, Middle Initial)

Mailing Address 6165 Fernbrook Lane N

City Plymouth State MN Zip Code 55446-3742

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

Name of Employer St. Jude Medical Occupation VP, Global Quality

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
 11 / 24 / 2014
Transaction ID : PR53767408143

Amount of Each Receipt this Period
150.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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 16
	<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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Jason Zellers			Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2014 Transaction ID : PR53767418143
Mailing Address 3561 Settlers Way			Amount of Each Receipt this Period 300.00
City Stillwater	State MN	Zip Code 55082-3453	P/R Deduction (\$100.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer St. Jude Medical	Occupation VP Gen Counsel and Corp Secretary		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00		

Full Name (Last, First, Middle Initial) B. Rachel Ellingson			Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2014 Transaction ID : PR53767428143
Mailing Address 5019 Arden Ave			Amount of Each Receipt this Period 300.00
City Edina	State MN	Zip Code 55424-1315	P/R Deduction (\$100.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer St. Jude Medical	Occupation VP, Corporate Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00		

Full Name (Last, First, Middle Initial) C. Angela Craig			Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2014 Transaction ID : PR53767448143
Mailing Address 1580 Blackhawk Lake Drive			Amount of Each Receipt this Period 150.00
City Eagan	State MN	Zip Code 55122-1245	P/R Deduction (\$50.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer St. Jude Medical	Occupation VP, Global Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 16
<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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

A. Damien Janet
Full Name (Last, First, Middle Initial)

Mailing Address 5145 Baltimore

City Kansas City State MO Zip Code 64112-2403

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

Name of Employer St. Jude Medical Occupation Field Clinical Engineer II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR53768138143

Amount of Each Receipt this Period **30.00**

P/R Deduction (\$10.00 Bi-Weekly)

B. Christine Roberts
Full Name (Last, First, Middle Initial)

Mailing Address 3005 Harris Blvd

City Austin State TX Zip Code 78703-1419

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

Name of Employer St. Jude Medical Occupation Dir, Compensation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR53769388143

Amount of Each Receipt this Period **30.00**

P/R Deduction (\$10.00 Bi-Weekly)

C. Fernando Acuna
Full Name (Last, First, Middle Initial)

Mailing Address 10830 SW 138th street

City Miami State FL Zip Code 33176-6530

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

Name of Employer St. Jude Medical Occupation Dir, Corporate Accounts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR53769578143

Amount of Each Receipt this Period **30.00**

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **90.00**

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 13 OF 16
	<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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

A. Jeffery Donatto
Full Name (Last, First, Middle Initial)

Mailing Address 45482 White Pines Dr

City State Zip Code
Novi MI 48374-3719

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

Name of Employer Occupation
St. Jude Medical Dir, Sr. CVD Strategic Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2014
Transaction ID : PR53769768143

Amount of Each Receipt this Period
75.00

P/R Deduction (\$25.00 Bi-Weekly)

B. Ashli Douglas
Full Name (Last, First, Middle Initial)

Mailing Address 615 25th St. S

City State Zip Code
Arlington VA 22202-2529

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

Name of Employer Occupation
St. Jude Medical Sr Director Government Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2050.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2014
Transaction ID : PR53771458143

Amount of Each Receipt this Period
300.00

P/R Deduction (\$100.00 Bi-Weekly)

C. Michael Diverde
Full Name (Last, First, Middle Initial)

Mailing Address 933 Angels Camp Court

City State Zip Code
Las Vegas NV 89138-4503

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

Name of Employer Occupation
St. Jude Medical Dir, Regional Sales, EP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2014
Transaction ID : PR53771958143

Amount of Each Receipt this Period
75.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Daniel Balkcom

Mailing Address 308 Polo Trail

City State Zip Code
 Colleyville TX 76034-7579

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

Name of Employer Occupation
 St. Jude Medical Dir, Regional Sales, NMD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2014
Transaction ID : PR53772058143

Amount of Each Receipt this Period
 36.00

P/R Deduction (\$12.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Jacob Walters

Mailing Address 7309 South Heatherride Ave

City State Zip Code
 Sioux Falls SD 57108-3351

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

Name of Employer Occupation
 St. Jude Medical Direct Sales Rep, AF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2014
Transaction ID : PR53777068143

Amount of Each Receipt this Period
 45.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Don Dietz

Mailing Address 9509 Greenfield Dr

City State Zip Code
 Raleigh NC 27615-2308

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

Name of Employer Occupation
 St. Jude Medical Direct Sales Rep, CRM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2014
Transaction ID : PR53778658143

Amount of Each Receipt this Period
 45.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 126.00

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 15 OF 16
	<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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

A. Steven Allen
Full Name (Last, First, Middle Initial)
Mailing Address 408 Gregan Court

City Matthews	State NC	Zip Code 28104-7000
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FEC ID number of contributing federal political committee. **C**

Name of Employer St. Jude Medical	Occupation Territory Mgr, Structural Heart
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2014

Transaction ID : PR53778828143

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Bi-Weekly)

B. Marcus Gonzales
Full Name (Last, First, Middle Initial)
Mailing Address 313 Pelican Avenue

City McAllen	State TX	Zip Code 78504-1730
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FEC ID number of contributing federal political committee. **C**

Name of Employer St. Jude Medical	Occupation Direct Sales Rep, CRM
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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
11	/	24	/	2014

Transaction ID : PR53781048143

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

C. Christopher Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 226 N. Shelmore Blvd

City Mt Pleasant	State SC	Zip Code 29464-6616
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FEC ID number of contributing federal political committee. **C**

Name of Employer St. Jude Medical	Occupation Dir, Sr. Regional Sales EP
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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
11	/	24	/	2014

Transaction ID : PR53782308143

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	345.00
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 16 OF 16
<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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. David Hendrick		Date of Receipt 11 / 24 / 2014 Transaction ID : PR53782728143
Mailing Address 2204 Demona Dr		Amount of Each Receipt this Period 150.00
City Austin State TX Zip Code 78733-1689	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer St. Jude Medical Occupation Sr VP, Sales Operations	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00

Full Name (Last, First, Middle Initial) B. Richard Chute II		Date of Receipt 11 / 24 / 2014 Transaction ID : PR64449018143
Mailing Address 62 Perkins St		Amount of Each Receipt this Period 150.00
City Charlestown State MA Zip Code 02129-1218	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer St. Jude Medical Occupation Sales	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00

Full Name (Last, First, Middle Initial) C. Anne Dougherty		Date of Receipt 11 / 24 / 2014 Transaction ID : PR64450038143
Mailing Address 400 Hessian Drive		Amount of Each Receipt this Period 300.00
City Kennett Square State PA Zip Code 19348-2863	FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Bi-Weekly)
Name of Employer St Jude Medical, INC Occupation FCE II	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	3624.00