Image# 14978110043 PAGE 1 / 22

### **FEC** FORM 3X

## **REPORT OF RECEIPTS** AND DISBURSEMENTS For Other Than An Authorized Committee

- Ottom OX	or Other Than An At	ithorized Committe	e	Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typin over the lines.	g, type 12FE4M5	
ST JUDE MEDICAL PO	DLITICAL ACTION	COMMITTEE		
<u> </u>				
ADDRESS (number and street)	ONE LILLEHEI PLAZA			
Check if different				
than previously reported. (ACC)	ST PAUL		MN	55117
2. FEC IDENTIFICATION NU	MBER ▼ C	ITY 🛦	STATE ▲	ZIP CODE ▲
C C00305029	3.	$\sim$	EW OR (A)	MENDED
4. TYPE OF REPORT (Choose One)	Report Due On:			20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:		. , ,		20 (M9) Dec 20 (M12) (Non-Election Year Only)  20 (M10) Jan 31 (YE)
April 15 Quarterly Report (Q1				
July 15 Quarterly Report (Q2	PRF-Election	Primary (12P  Convention (	H	
Cottober 15 Quarterly Report (Q3	· ·			
January 31 Year-End Report (YE	E) Elec	tion on	D D / Y Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-Election	General (30G	) Runoff (3	Special (30S)
Termination Report (TER)	Report for the:	tion on	D D / Y Y Y Y Y	in the State of
5. Covering Period 07	01 2014		09 30	2014
I certify that I have examined this  Type or Print Name of Treasurer	•	of my knowledge and b	elief it is true, correct and	d complete.
	RT G. FRENZ	[Electronically	Filed] Date 10	09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, errone	ous, or incomplete informat	ion may subject the pers	on signing this Report to the	ne penalties of 2 U.S.C. §437g.
Office Use Only				FEC FORM 3X Rev. 12/2004

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

#### ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

07 01 2014 09 30 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 50321.10 January 1, 2014 (b) Cash on Hand at 55095.10 Beginning of Reporting Period..... 94119.75 10345.75 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 65440.85 144440.85 6(a) and 6(c) for Column B)..... 28000.00 107000.00 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 37440.85 37440.85 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

×

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

t Covering the Period: From: 07	09 30 2014 COLUMN B					
I. Receipts	I. Receipts COLUMN A Total This Period					
	8057.75	78029.25				
(i) Itemized (use Schedule A)	6037.73	10023.23				
(ii) Unitemized	2288.00	16090.50				
Lines 11(a)(i) and (ii)	10345.75	94119.75				
Political Party Committees	0.00	0.00				
(such as PACs)	0.00	0.00				
,						
Totals to Line 33, page 5)▶	10345.75	94119.75				
	0.00	0.00				
Loans Received	0.00	0.00				
Bergamanta Basakant	0.00	0.00				
1 1	0.00	0.00				
· · · · · · · · · · · · · · · · · · ·	0.00	0.00				
		7				
	0.00	0.00				
	0.00	7 7				
· ·	0.00	0.00				
· · · · · · · · · · · · · · · · · · ·	0.00	7				
	0.00	0.00				
(	7	, , ,				
Levin Funds (from Schedule H5)	0.00	0.00				
	ntributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	Intributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	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	28000.00	104500.00
24.	Independent Expenditures		
)5	(use Schedule E)	0.00	0.00
.J.	(2 U.S.C. §441a(d))	0.00	0.00
	(use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
7	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
	(626) 46 17 (63)	7	
	(d) Total Contribution Refunds	0.00	
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
29.	Other Disbursements	0.00	2500.00
29.	Other Disbursements	0.00	2300.00
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	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	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	3.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	28000.00	107000.00
32.			
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	28000.00	107000.00
	110111 EITIG 01/	2000.00	107000.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures			
3. Total Contributions (other than loans) (from Line 11(d), page 3)	10345.75	94119.75	
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10345.75	94119.75	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00	

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

FOR LINE NUMBER:					PAGE	6	OF	22	
(check only one)									
[	X	11a		11b		11c	12	!	
		13		14		15	16	;	17

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.						
$\rangle$	NAME OF COMMITTEE (In Full) ST JUDE MEDICAL POLITICAL	ACTION COMMITTEE							
١.	Full Name (Last, First, Middle Initial) Ann Graves		Date of Receipt						
	Mailing Address 1455 Clippership Court		09 30 2014						
	City	State Zip Code	Transaction ID : PR53750788141						
	Woodbury	MN 55125-8564	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C	525.00						
	Name of Employer	Occupation							
	St. Jude Medical	VP, Regulatory							
	Receipt For:	Aggregate Year-to-Date ▼							
	Primary General Other (specify) ▼	1275.00	P/R Deduction (\$75.00 Bi-Weekly)						
3.	Full Name (Last, First, Middle Initial) Atul Sinha		Date of Receipt						
	Mailing Address 1828 113th Court NE	09 30 _2014 _							
	City	State Zip Code	Transaction ID : PR53754278141						
	Blaine	MN 55449-5484	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C	175.00						
	Name of Employer	Occupation							
	St. Jude Medical	Director, Quality							
	Receipt For:	Aggregate Year-to-Date ▼							
	Primary General	425.00	P/R Deduction (\$25.00 Bi-Weekly)						
	Other (specify) ▼	423.00							
).	Full Name (Last, First, Middle Initial) Bradley Roberts		Date of Receipt						
	Mailing Address 1553 Sherman Lake Ct		09 30 2014						
	City	State Zip Code	Transaction ID : PR53754618141						
	Lino Lakes	MN 55038-9630	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C	175.00						
	Name of Employer	Occupation							
	St. Jude Medical	Vice President, Operations							
	Receipt For:	Aggregate Year-to-Date ▼							
	Primary General		P/R Deduction (\$25.00 Bi-Weekly)						
	Other (specify) ▼	400.00							
s	UBTOTAL of Receipts This Page (optional)		875.00						
T	OTAL This Period (last page this line number o	nly)							

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

	FOR L	PAGE	7	OF	22				
(check only one)									
	X 1	1a	11b		11c	12			
	10	3	14		15	16		17	

or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) ST JUDE MEDICAL POLITICA	L ACTION COMMITTEE						
Full Name (Last, First, Middle Initial)  Brenda Inman  Mailing Address (200 b. (* LH)		Date of Receipt					
Mailing Address 4260 Lynfield Lane							
City	State Zip Code CA 95136-1622	Transaction ID : PR53755268141					
San Jose	CA 95136-1622	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	175.00					
Name of Employer	Occupation						
St. Jude Medical	Manager, Localization						
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$25.00 Bi-Weekly)					
Full Name (Last, First, Middle Initial)  3. Frank Zawlocki		Date of Receipt					
Mailing Address 25363 Avenida Ronada	09 30 / 2014						
City Valencia	State Zip Code CA 91355-3203	Transaction ID : PR53758368141					
_	CA 91355-3203	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	25.00						
Name of Employer	Occupation						
St. Jude Medical  Receipt For:	Engineer, Prin Test Developmnt						
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  275.00	P/R Deduction (\$25.00 Bi-Weekly)					
Full Name (Last, First, Middle Initial)  John Davis		Date of Receipt					
Mailing Address 10375 E. Texas Sage Ln.		09 30 2014					
City	State Zip Code AZ 85255-8505	Transaction ID : PR53760808141					
Scottsdale 550 IB words and Countribution	AZ 85255-8505	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	175.00					
Name of Employer	Occupation						
St. Jude Medical	Director/Plant Manager						
Receipt For: Primary General	Aggregate Year-to-Date ▼	P/R Deduction (\$25.00 Bi-Weekly)					
Other (specify) ▼	425.00	1.714 Deduction (\$20.00 DE-VVGENIY)					
SUBTOTAL of Receipts This Page (optional)		375.00					
TOTAL This Period (last page this line number	only)						

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

FOR LINE NUMBER:					PAGE	8	OF	22	
(check only one)									
>	<b>1</b> 1a		11b		11c	12			
	13		14		15	16		17	

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.			
$\rangle$	NAME OF COMMITTEE (In Full) ST JUDE MEDICAL POLITICAL	. ACTION COMMITTEE				
Α.	Full Name (Last, First, Middle Initial) Maria Hernandez		Date of Receipt			
	Mailing Address 37735 Grant Court		09 30 2014			
	City	State Zip Code	Transaction ID : PR53762468141			
	Palmdale	CA 93552-3950	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	112.00			
	Name of Employer	Occupation				
	St. Jude Medical	Supv, Sr Production				
	Receipt For:	Aggregate Year-to-Date ▼				
	Primary General  Other (specify) ▼	272.00	P/R Deduction (\$16.00 Bi-Weekly)			
B.	Full Name (Last, First, Middle Initial) Werner Hafelfinger		Date of Receipt			
	Mailing Address 5508 Via Mira Flores		M M / D D / Y Y Y Y			
		09 30 _2014 _				
	City	State Zip Code	Transaction ID : PR53763278141			
	Thousand Oaks	CA 91320-6883	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	105.00			
	Name of Employer	Occupation				
	St. Jude Medical	VP, Operations				
	Receipt For:	Aggregate Year-to-Date ▼				
	Primary General	riggregate real to bate v	P/R Deduction (\$15.00 Bi-Weekly)			
	Other (specify) ▼	240.00	(4.5.5.5.4)			
С.	Full Name (Last, First, Middle Initial)  Jeffrey Dallager		Date of Receipt			
	Mailing Address 6918 132nd Street		09 30 2014			
	City	State Zip Code	Transaction ID : PR53764748141			
	Hugo	MN 55038-5410	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	140.00			
	Name of Employer	Occupation				
	St. Jude Medical	Sr. Vice President Finance				
	Receipt For:	Aggregate Year-to-Date ▼				
	Primary General		P/R Deduction (\$20.00 Bi-Weekly)			
	Other (specify) ▼	340.00				
s	UBTOTAL of Receipts This Page (optional)		357.00			
Т	OTAL This Period (last page this line number of	only)				

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

	FOR LINE NUMBER:					PAGE	9	OF	22
(check only one)									
	×	11a		11b		11c	12		
		13		14		15	16		17

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.					
$\rangle$	NAME OF COMMITTEE (In Full) ST JUDE MEDICAL POLITICAL	ACTION COMMITTEE						
١.	Full Name (Last, First, Middle Initial) Steven Hill		Date of Receipt					
	Mailing Address 12933 Monticello Lane		09 30 _ 2014 _					
	City	State Zip Code	Transaction ID : PR53766378141					
	Champlin	mplin MN 55316-1265						
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period					
	Name of Employer	Occupation						
	St. Jude Medical	Manager, eDiscovery & Investigations						
	Receipt For:	Aggregate Year-to-Date ▼						
	Primary General Other (specify) ▼	400.00	P/R Deduction (\$25.00 Bi-Weekly)					
3.	Full Name (Last, First, Middle Initial) Lisa Schoening		Date of Receipt					
	Mailing Address 9902 Jandel Ave Ne	M = M / D = D / Y = Y = Y						
	City	State Zip Code	09 30 2014 Transaction ID : PR53767318141					
	Monticello	MN 55362-4316	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	350.00					
	Name of Employer	Occupation						
	St. Jude Medical	Leader, HR Business Partner						
	Receipt For:  Primary General  Other (specify) ▼	P/R Deduction (\$50.00 Bi-Weekly)						
).	Full Name (Last, First, Middle Initial)  Donald Zurbay		Date of Receipt					
	Mailing Address 10457 Scott Ave N		09 30 2014					
	City	State Zip Code	Transaction ID : PR53767398141					
	Brooklyn Park	MN 55443-5428	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	350.00					
	Name of Employer	Occupation						
	St. Jude Medical	VP, Finance & CFO						
	Receipt For:	Aggregate Year-to-Date ▼						
	Primary General Other (specify) ▼	800.00	P/R Deduction (\$50.00 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	875.00					
Т	OTAL This Period (last page this line number o	nly)						

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

				MBER	:	PAGE	 10	OF	22
(cł	nec	ck only	or	ne)					
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		13		14		15	16		17

	nd Statements may not be sold or used by any per g the name and address of any political committee t	
NAME OF COMMITTEE (In Full) ST JUDE MEDICAL POLITION	CAL ACTION COMMITTEE	
Full Name (Last, First, Middle Initial)  Jeffry Fecho		Date of Receipt
Mailing Address 6165 Fernbrook Lane N		09 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : PR53767408141
Plymouth	MN 55446-3742	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer	Occupation	+
St. Jude Medical	VP, Global Quality	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  850.00	P/R Deduction (\$50.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)  Jason Zellers		Date of Receipt
Mailing Address 3561 Settlers Way		M = M / D = D / Y = Y = Y
City	State Zin Code	09 30 2014
City	State Zip Code MN 55082-3453	Transaction ID : PR53767418141
Stillwater	MN 55082-3453	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	700.00
Name of Employer	Occupation	
St. Jude Medical	VP Gen Counsel and Corp Secretary	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00	P/R Deduction (\$100.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)  C. Rachel Ellingson	·	Date of Receipt
Mailing Address 5019 Arden Ave		09 30 2014
City	State Zip Code	Transaction ID : PR53767428141
Edina	MN 55424-1315	_ Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	700.00
Name of Employer	Occupation	†
St. Jude Medical	VP, Corporate Relations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		P/R Deduction (\$100.00 Bi-Weekly)
Other (specify) ▼	1700.00	, , , , , , , , , , , , , , , , , , , ,
SUBTOTAL of Receipts This Page (optional	1)	1750.00
TOTAL This Period (last page this line num	ber only)	

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

FOR LINE NUMBER:					PAGE	 11	OF	22	
(c	he	ck only	or	ne)					
	X	11a		11b		11c	12	!	
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or for commercial purposes, other than using the	he name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) ST JUDE MEDICAL POLITICA	AL ACTION COMMITTEE	
Full Name (Last, First, Middle Initial)  Angela Craig  Mailing Address 1580 Blackhawk Lake Drive		Date of Receipt
		09 30 2014
City	State Zip Code	Transaction ID: PR53767448141
Eagan	MN 55122-1245	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer	Occupation	1
St. Jude Medical	VP, Global Human Resources	]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	800.00	P/R Deduction (\$50.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)  Jeffery Donatto		Date of Receipt
Mailing Address 45482 White Pines Dr		09 30 / 2014
City	State Zip Code MI 48374 3710	Transaction ID : PR53769768141
Novi	MI 48374-3719	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer	Occupation	1
St. Jude Medical	Dir, Sr. CVD Strategic Accounts	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$25.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)  Ashli Douglas		Date of Receipt
Mailing Address 615 25th St. S		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : PR53771458141
Arlington	VA 22202-2529	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	700.00
Name of Employer	Occupation	1
St. Jude Medical	Sr Director Government Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1650.00	P/R Deduction (\$100.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1225.00
TOTAL This Period (last page this line number	r only)	

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

I OIT LITTE ITOMBETT					PAGE	. 1	12	OF	22
(che	eck only	one)							
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	13	14	4		15		16		17

or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) ST JUDE MEDICAL POLITICA	AL ACTION COMMITTEE	
Full Name (Last, First, Middle Initial)  Michael Diverde  Mailing Address 933 Angels Camp Court		Date of Receipt
		09 30 2014
City	State Zip Code	Transaction ID : PR53771958141
Las Vegas	NV 89138-4503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer	Occupation	1
St. Jude Medical	Dir, Regional Sales, EP	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	D/D D. J
Primary General Other (specify) ▼	425.00	P/R Deduction (\$25.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)  Daniel Balkcom		Date of Receipt
Mailing Address 308 Polo Trail		09 30 / Y = Y = Y = Y
City	State Zip Code	Transaction ID : PR53772058141
Colleyville	TX 76034-7579	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer	Occupation	1
St. Jude Medical	Dir, Regional Sales, NMD	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  204.00	P/R Deduction (\$12.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)  Jacob Walters		Date of Receipt
Mailing Address 7309 South Heatherride Ave		09 30 / Y Y Y Y Y Y
City Signar Fella	State Zip Code	Transaction ID : PR53777068141
Sioux Falls	SD 57108-3351	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	105.00
Name of Employer	Occupation	1
St. Jude Medical	Direct Sales Rep, AF	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	240.00	P/R Deduction (\$15.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	364.00
TOTAL This Period (last page this line numbe	r only)	

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

TOTAL MONDER.					PAGE	1	13	OF	22		
	(0	he	ck only	or	ne)						
		X	11a		11b		11c		12		
			13		14		15		16		17

NAME OF COMMITTEE (In Full)  ST JUDE MEDICAL POLITICAL ACTION COMMITTEE  Full Name (Last, First, Middle Initial) A, Don Dietz  Mailing Address 9609 Greenfield Dr  City State Zip Code NC 277615-2308  FEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical  FEC ID number of contributing Cother (specify) ▼  Full Name (Last, First, Middle Initial) B. Steven Allen Mailing Address 408 Gregan Court  City Name of Employer Coupation City State Zip Code NC 28104-7000  FEC ID number of contributing federal political committee.  City Primary General Other (specify) ▼  Coupation City Primary General Other (specify) ▼  Coupation City State Zip Code NC 28104-7000  Full Name (Last, First, Middle Initial) Coupation City State Zip Code NC 28104-7000  Full Name (Last, First, Middle Initial) Coupation Coupation City State Zip Code Transaction ID: PR83778828141 Amount of Each Receipt his Period  Primary General Other (specify) ▼  Coupation City State Zip Code Transaction ID: PR8378828141 Amount of Each Receipt his Period  Pir Deduction (\$15.00 Bi-Weekly)  Date of Receipt  Coupation City State Zip Code Transaction ID: PR83781828141 Amount of Each Receipt his Period  Date of Receipt  Transaction ID: PR83781828141 Amount of Each Receipt his Period  Pir Deduction (\$15.00 Bi-Weekly)  Date of Receipt  Transaction ID: PR83781848141 Amount of Each Receipt his Period  Pir Deduction (\$15.00 Bi-Weekly)  Date of Receipt  Pir Deduction (\$15.00 Bi-Weekly)  Date of Receipt  Pir Deduction (\$15.00 Bi-Weekly)  Date of Receipt  Pir Deduction (\$15.00 Bi-Weekly)  Pir Deduction (\$15.00 Bi-Weekly)  Date of Receipt  Pir Deduction (\$15.00 Bi-Weekly)  Pir Deduction (\$15.00 Bi-Weekly)  Pir Deduction (\$15.00 Bi-Weekly)  Date of Receipt  Pir Deduction (\$15.00 Bi-Weekly)  Pir Deduction (\$15.00 Bi-Weekly)	or for commercial purposes, other than us	ing the name and address of any political committee t	o solicit contributions from such committee.
A. Don Dietz  Mailing Address 9509 Greenfield Dr  City Raleigh Raleigh Roc 27615-2308  FEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical Pother (specify) ▼  State Zip Code Primary General Other (specify) ▼  Primary General Other (specify) ▼  Primary General City Matthews NC 28104-7000  FEC ID number of contributing federal political committee.  City Matthews NC 28104-7000  FEC ID number of contributing federal political committee.  City Primary General Other (specify) ▼  Primary General City State Zip Code NC 28104-7000  FEC ID number of contributing federal political committee.  City Primary General Other (specify) ▼  Primary General City State Zip Code Tix 78504-1730  FUIl Name (Last, First, Middle Initial) C. Marcus Gonzales Mailing Address 313 Pelican Avenue City State Zip Code Tix 78504-1730  FEC ID number of contributing federal political committee. City State Zip Code Tix 78504-1730  FEC ID number of contributing federal political committee. City State Zip Code Tix 78504-1730  FEC ID number of contributing federal political committee. City State Zip Code Tix 78504-1730  FEC ID number of contributing federal political committee. City State Zip Code Tix 78504-1730  FEC ID number of contributing federal political committee. City State Zip Code Tix 78504-1730  Primary General Other (specify) ▼  Primary General  Primary Beauties  Transaction ID: PR53778684141  Amount of Each Receipt this Period  Primary Beauties Tix Number Amount of Each Receipt t		TICAL ACTION COMMITTEE	
City Raleigh State Zip Code NC 27615-2308  FEC ID number of contributing rederal political committee.  Name of Employer St. Jude Medical Receipt For: Primary General Other (specify) ▼ 225.00  Full Name (Last, First, Middle Initial) B. Steven Allen Mailing Address 408 Gregan Court City Matthews NC 28104-7000 FEC ID number of contributing rederal political committee. C 28104-7000 FULL Name (Last, First, Middle Initial) B. Steven Allen Matthews NC 28104-7000 FEC ID number of contributing rederal political committee. C 365.00  Full Name (Last, First, Middle Initial) C 36104-7000 FEC ID number of contributing rederal political committee. Primary General Other (specify) ▼ 255.00  Full Name (Last, First, Middle Initial) C. Marcus Gonzales Mailing Address 313 Pelican Avenue City State Zip Code TX 78504-1730 FEC ID number of contributing rederal political committee. C 350.00  Full Name (Last, First, Middle Initial) C. Marcus Gonzales Mailing Address 313 Pelican Avenue City State Zip Code TX 78504-1730 FEC ID number of contributing rederal political committee. C 350.00  Full Name (Last, First, Middle Initial) C Marcus Gonzales Mailing Address 313 Pelican Avenue City State Zip Code TX 78504-1730 FEC ID number of contributing rederal political committee. C 350.00  Full Name (Last, First, Middle Initial) C Marcus Gonzales Mailing Address 313 Pelican Avenue City State Zip Code TX 78504-1730 FEC ID number of contributing rederal political committee. C 350.00  Full Name (Last, First, Middle Initial) FEC ID number of contributing rederal political committee. Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Primary General			Date of Receipt
Raleigh  Raleigh  REC ID number of contributing rederal political committee.  Name of Employer  St. Jude Medical  Receipt For:    Primary   General   Gener	Mailing Address 9509 Greenfield Dr		
FEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical Receipt For:    Other (specify) ▼   Deduction (\$15.00 Bi-Weekly)   P/R Deduction (\$15.00 Bi-Weekly)   Date of Receipt			Transaction ID : PR53778658141
State   Zip Code   Transaction   Description   Date of Receipt	Raleigh	NC 27615-2308	_ Amount of Each Receipt this Period
St. Jude Medical Receipt For: Primary General Other (specify) ▼  Receipt For: Receipt For: Primary General Other (specify) ▼  Receipt For: Primary General Other (specify) Th	•	C	105.00
Receipt For:    Primary   General   Other (specify) ▼   225.00	Name of Employer	Occupation	†
Primary General Other (specify) ▼ 225.00  Full Name (Last, First, Middle Initial)  B. Steven Allen Mailing Address 408 Gregan Court  City State Zip Code NC 28104-7000  FEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical  Receipt For: Primary General  City State Zip Code Territory Mgr. Structural Heart  Aggregate Year-to-Date ▼  P/R Deduction (\$15.00 Bi-Weekly)	St. Jude Medical	Direct Sales Rep, CRM	
B. Steven Allen  Mailing Address 408 Gregan Court  City State Zip Code NC 28104-7000  FEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical  Feceipt For:  Primary General Other (specify) ▼ Cocupation  State Zip Code NC 28104-7000  Cocupation  Territory Mgr, Structural Heart  Aggregate Year-to-Date ▼  P/R Deduction (\$15.00 Bi-Weekly)  Date of Receipt  Transaction ID : PR53778828141  Amount of Each Receipt this Period  P/R Deduction (\$15.00 Bi-Weekly)  Date of Receipt  Transaction ID : PR53781828141  Amount of Each Receipt this Period  P/R Deduction (\$15.00 Bi-Weekly)  Date of Receipt  Transaction ID : PR53781048141  Amount of Each Receipt this Period  P/R Deduction (\$15.00 Bi-Weekly)  Date of Receipt  Transaction ID : PR53781048141  Amount of Each Receipt this Period  C Transaction ID : PR53781048141  Amount of Each Receipt this Period  C Transaction ID : PR53781048141  Amount of Each Receipt this Period  P/R Deduction (\$50.00 Bi-Weekly)  P/R Deduction (\$50.00 Bi-Weekly)	Primary General		P/R Deduction (\$15.00 Bi-Weekly)
City Matthews NC  28104-7000  FEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical  Receipt For: Primary General Other (specify) ▼  City Macus Gonzales  Mailing Address 313 Pelican Avenue  City McAllen  FEC ID number of contributing federal political committee.  State Zip Code Transaction ID : PR53778928141  Amount of Each Receipt this Period  P/R Deduction (\$15.00 Bi-Weekly)  P/R Deduction (\$15.00 Bi-Weekly)  Date of Receipt  Tansaction ID : PR53778928141  Amount of Each Receipt this Period  P/R Deduction (\$15.00 Bi-Weekly)  Date of Receipt  Transaction ID : PR53781048141  Transaction ID : PR53781048141  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical PEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical Pirect Sales Rep. CRM  Receipt For: Aggregate Year-to-Date ▼  P/R Deduction (\$50.00 Bi-Weekly)  P/R Deduction (\$50.00 Bi-Weekly)			Date of Receipt
Matthews NC 28104-7000  FEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical  Receipt For:  Primary General Other (specify) ▼  C. Marcus Gonzales  Mailing Address 313 Pelican Avenue  City State Zip Code TX 78504-1730  FEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical  C. Marcus Gonzales  Mailing Address 313 Pelican Avenue  City State Zip Code TX 78504-1730  FEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical  Receipt For:  Primary General Occupation  St. Jude Medical  Receipt For:  Aggregate Year-to-Date ▼  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼			
FEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical  Receipt For:  Primary General Other (specify) ▼  City State Zip Code TX 78504-1730  FEC ID number of contributing federal political committee.  Name of Employer State S			
Name of Employer St. Jude Medical Receipt For:  Primary General Other (specify) ▼  State Zip Code TX 78504-1730  FEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical Receipt For:  Primary General Other (specify) ▼  State Zip Code TX 78504-1730  FEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  P/R Deduction (\$15.00 Bi-Weekly)  P/R Deduction (\$50.00 Bi-Weekly)	_	NC 28104-7000	Amount of Each Receipt this Period
St. Jude Medical  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  P/R Deduction (\$15.00 Bi-Weekly)  P/R Deduction (\$15.00 Bi-Weekly)  P/R Deduction (\$15.00 Bi-Weekly)  Date of Receipt  Date of Receipt  Transaction ID : PR53781048141  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  P/R Deduction (\$15.00 Bi-Weekly)  P/R Deduction (\$50.00 Bi-Weekly)	•	C	105.00
Receipt For:    Primary   General     Other (specify) ▼     Aggregate Year-to-Date ▼     P/R Deduction (\$15.00 Bi-Weekly)	. ,	Occupation	1
Primary General Other (specify) ▼		Territory Mgr, Structural Heart	
Mailing Address 313 Pelican Avenue  City McAllen  FEC ID number of contributing federal political committee.  Name of Employer St. Jude Medical Receipt  M M M M M M M M M M M M M M M M M M M	Primary General		P/R Deduction (\$15.00 Bi-Weekly)
City McAllen  TX  TX  T8504-1730   State Zip Code TX  TRANSaction ID: PR53781048141  Amount of Each Receipt this Period  C  St. Jude Medical  Receipt For:  Primary Other (specify) ▼  Aggregate Year-to-Date ▼  P/R Deduction (\$50.00 Bi-Weekly)			Date of Receipt
McAllen  TX 78504-1730  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  St. Jude Medical  Receipt For:  Primary  Other (specify) ▼  Aggregate Year-to-Date ▼  P/R Deduction (\$50.00 Bi-Weekly)	Mailing Address 313 Pelican Avenue		
federal political committee.  Name of Employer  St. Jude Medical  Receipt For:  Primary  Other (specify) ▼  Direct Sales Rep, CRM  Aggregate Year-to-Date ▼  P/R Deduction (\$50.00 Bi-Weekly)	-	•	
St. Jude Medical  Receipt For:  Primary  Other (specify) ▼  Direct Sales Rep, CRM  Aggregate Year-to-Date ▼  P/R Deduction (\$50.00 Bi-Weekly)	•	C	350.00
Receipt For:  Primary  Other (specify) ▼  Aggregate Year-to-Date ▼  P/R Deduction (\$50.00 Bi-Weekly)	Name of Employer	Occupation	†
Primary General Other (specify) ▼  P/R Deduction (\$50.00 Bi-Weekly)		Direct Sales Rep, CRM	
Other (specify)  850.00		Aggregate Year-to-Date ▼	]
SUBTOTAL of Receipts This Page (optional)		850.00	P/R Deduction (\$50.00 Bi-Weekly)
TOTAL This Period (last page this line number only)		<u> </u>	560.00

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

١	FOR LINE NUMBER:					PAGE	•	14	OF	22
	(check only one)									
	X	11a		11b		11c		12		
		13		14		15		16		17

or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) ST JUDE MEDICAL POLITICA	AL ACTION COMMITTEE	
Full Name (Last, First, Middle Initial)  A. Robert Hastings  Mailing Address 1713 Shoal Creek Avenue		Date of Receipt
ag / Notices 1713 Silual Creek Avenue		09 30 2014
City	State Zip Code	Transaction ID : PR53781238141
Wichita Falls	TX 76310-8029	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	-1350.00
Name of Employer	Occupation	1
St. Jude Medical	Direct Sales Rep, CRM	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	150.00	P/R Deduction (\$-1350.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)  Christopher Johnson		Date of Receipt
Mailing Address 226 N. Shelmore Blvd	Chale To C :	09 30 2014
City Mt Pleasant	State Zip Code SC 29464-6616	Transaction ID : PR53782308141
Mt Pleasant	20.00.00.0	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer	Occupation	1
St. Jude Medical	Dir, Sr. Regional Sales EP	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  850.00	P/R Deduction (\$50.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Charles DuVall		Date of Receipt
Mailing Address 536 Apperson Cove		09 30 2014
City	State Zip Code	Transaction ID : PR53782458141
Marion	AR 72364-2654	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	700.00
Name of Employer	Occupation	1
St. Jude Medical	Direct Consultant	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1600.00	P/R Deduction (\$100.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	-300.00
TOTAL This Period (last page this line numbe	r only)	

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

FOR LINE NUMBER:					PAGE	 15	OF	22	
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	>	<b>1</b> 1a		11b		11c	12		
		13		14		15	16		17

or for commercial purposes, other than using t	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) ST JUDE MEDICAL POLITICA	AL ACTION COMMITTEE	
Full Name (Last, First, Middle Initial)  Scott Holstine  Mailing Address 6200 Soter Pkwy		Date of Receipt
Maning Address 0200 Solel PKWy		09 30 _ 2014 _
City	State Zip Code	Transaction ID : PR53782518141
Austin	TX 78735-6135	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	576.75
Name of Employer	Occupation	1
St. Jude Medical	DVP, Vascular	_
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2499.25	P/R Deduction (\$192.25 Bi-Weekly)
VIETE 27 ▼		
Full Name (Last, First, Middle Initial)  3. David Hendrick		Date of Receipt
Mailing Address 2204 Demona Dr		09 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : PR53782728141
Austin	TX 78733-1689	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer	Occupation	1
St. Jude Medical	Sr VP, Sales Operations	1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  850.00	P/R Deduction (\$50.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)  Chute II		Date of Receipt
Mailing Address 62 Perkins St		09 30 2014
City Charlestown	State Zip Code MA 02129-1218	Transaction ID : PR64449018141 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer	Occupation	-
St. Jude Medical	Sales	
Receipt For:	Aggregate Year-to-Date ▼	]
Primary General  Other (specify) ▼	850.00	P/R Deduction (\$50.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).		1276.75
TOTAL This Period (last page this line number	er only)	

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

	_	LINE	_		:	PAGE	 16	OF	22
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	X	11a		11b		11c	12		
		13		14		15	16		17

or for commercial purposes, other than using	g the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) ST JUDE MEDICAL POLITION	CAL ACTION COMMITTEE	
Full Name (Last, First, Middle Initial)  Anne Dougherty  Mailing Address 400 Hessian Drive		Date of Receipt
City Kennett Square	State Zip Code PA 19348-2863	09 30 2014  Transaction ID : PR64450038141  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	700.00
Name of Employer St Jude Medical, INC	Occupation FCE II	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	P/R Deduction (\$100.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)  Mailing Address	·	Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address  City	State Zip Code	M = M / D = D / Y = Y = Y
FEC ID number of contributing	C Zip Code	Amount of Each Receipt this Period
federal political committee.  Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional	I)	700.00
TOTAL This Period (last page this line num	ber only)	8057.75

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 17 OF 22				
	EMIZED DISBURSEMENTS	Use separate schedule(s	s) (check only	TTO MEET 1.			
11	LIVIIZED DISBURSEIVIEN IS	for each category of the	21h	22 🔀 23 🗆 24 🗆 25 🗀 26			
		Detailed Summary Page	27	28a 28b 28c 29 30b			
Ar	ny information copied from such Reports and Staten	nents may not be sold or	used by any ners	on for the purpose of soliciting contributions			
	for commercial purposes, other than using the name						
	NAME OF COMMITTEE (In Full)						
$  \rangle$	ST JUDE MEDICAL POLITICAL A	CTION COMMITTI	FF				
/	or observer being the						
	Full Name (Last, First, Middle Initial)						
A.	FRIENDS OF LOIS CAPPS		Date of Disbursement				
				M M / D D / Y Y Y Y			
	Mailing Address PO Box 23940			09 30 2014			
	O'th.	75.0.4.					
	,	State Zip Code CA 93121		Transaction ID: 6476583			
	Santa Barbara Purpose of Disbursement	CA 93121	1				
	Tarpood of Biobardemont		011	Amount of Each Disbursement this Period			
	Candidate Name			Authority of East Bissardement and Ferred			
	Ms. Lois Capps		Category/ Type	1000.00			
	<u> </u>	nent For: 2014	.,,,,				
		Primary Seneral					
	President	Other (specify) ▼					
	State: CA District: 22						
	Full Name (Last, First, Middle Initial)						
В.	Marsha Blackburn for Congress			Date of Disbursement			
				M M / D D / Y Y Y Y			
	Mailing Address 499 South Capitol Street SW			09 30 2014			
	Suite 420						
	•	State Zip Code DC 20003		Transaction ID : 6476590			
	Washington Purpose of Disbursement	20003	T				
			011	Amount of Each Disbursement this Period			
	Candidate Name		Cotogony				
	Ms. Marsha Blackburn		Category/ Type	1500.00			
	Office Sought:	nent For: 2014					
	Senate	Primary Seneral					
	President	Other (specify)					
	State: TN District: 07						
	Full Name (Last, First, Middle Initial)						
C.	Ann Wagner For Congress			Date of Disbursement			
			M M / D D / Y Y Y Y				
	Mailing Address PO Box 50			09 30 2014			
	City	Photo 7in Onda					
	•	State Zip Code MO 63022		Transaction ID: 6476602			
	Purpose of Disbursement						
	·		011	Amount of Each Disbursement this Period			
	Candidate Name		Category/				
	Rep. Ann Wagner		Type	1000.00			
		nent For: 2014	1				
	Senate	Primary General					
	President	Other (specify) ▼					
	State: MO District: 02						
Γ							
s	SUBTOTAL of Disbursements This Page (optional)			3500.00			
Г							
I T	<b>OTAL</b> This Period (last page this line number only)						

SCHEDULE B (FEC Form 3X)		Use separate schedule(s)		1 OIT EINE NOMBEIT.					OF 22
IT	EMIZED DISBURSEMENTS	for each c	cate schedule(s) category of the Summary Page	(check only 21b 27	one) 22 28a	X 23 28b	24 28c	25 29	26 30b
	y information copied from such Reports and Statem for commercial purposes, other than using the nam			ed by any perso	n for the	purpose of	soliciting of	contribut	tions
	NAME OF COMMITTEE (In Full) ST JUDE MEDICAL POLITICAL AC								
	Full Name (Last, First, Middle Initial)								
Α.					M M	Disburser	) / Y	Y   Y	Y
	Mailing Address 499 S Capital Street SW, Suite 420				09	30		2014	
	Washington	State DC	Zip Code 20003		Trans	action ID :	6476604		
	Purpose of Disbursement			011	Amount	of Each [	Disburseme	nt this F	Period
	Candidate Name Mr. Jeff Duncan			Category/ Type				2500	.00
	Office Sought: House Disbursen	nent For: 20 Primary Other (speci	X General	Туре		7			
В.	Full Name (Last, First, Middle Initial) Renee Ellmers For Congress Com	mittee			Date of	Disburser		Y	V
	Mailing Address PO Box 99567				09	30		2014	
	Raleigh	State NC	Zip Code 27624		Trans	action ID	6476605		
	Purpose of Disbursement			011	Amount	of Each [	Disburseme	nt this F	Period
	Candidate Name Rep. Renee Ellmers RN			Category/ Type				1000	0.00
	Senate	nent For: 2 Primary Other (speci	<b>X</b> General						
C.	Full Name (Last, First, Middle Initial)  Scott Peters For Congress					Disburser			
	Mailing Address PO Box 70980		09 30 2014		Y				
	Washington	State DC	Zip Code 20024		Trans	action ID :	6476607		
	Purpose of Disbursement  Candidate Name  Rep. Scott Peters	011 Category/ Type	Amount	of Each [	Disburseme	nt this F			
	Office Sought: House Disbursen	nent For: 20 Primary Other (speci	X General	711 -					
H	UBTOTAL of Disbursements This Page (optional)  OTAL This Period (last page this line number only)				Ë	,	7	4500	.00

for each Detailed ents may and add  TION (  ate CA  ent For: ; rimary ether (spe	Zip Code 90010  2014  General ecify)	21b 27 used by any persitical committee to	Date of Disbursement  Transaction ID: 6476609  Amount of Each Disbursement this Period 2500.00  Date of Disbursement 2500.00	
and add	Zip Code 90010  2014  General ecify)	EE  011 Category/	Date of Disbursement  Transaction ID: 6476609  Amount of Each Disbursement this Period  2500.00  Date of Disbursement	
ate cA ::	Zip Code 90010  2014  General ecify)	011 Category/	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
ent For: : rimary ther (spe	Zip Code 90010 2014 X General ecify) ▼	011 Category/	Transaction ID: 6476609  Amount of Each Disbursement this Period 2500.00  Date of Disbursement	
ent For: : rimary ther (spe	Zip Code 90010 2014 X General ecify) ▼	011 Category/	Transaction ID: 6476609  Amount of Each Disbursement this Period 2500.00  Date of Disbursement	
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rimary ther (spe	General ecify) ▼		Date of Disbursement	
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rimary ther (spe	General ecify) ▼		M = M / D = D / Y = Y = Y	
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	Tip Ondo		M = M / D = D / Y = Y = Y	
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	7:- Code		1	
	7:n Cada			
	Zip Code		Transaction ID: 6476644	
'A	22301			
		011	Amount of Each Disbursement this Period	
		Category/		
		Type	1000.00	
rimary	X General			
State: MI District: 06  Full Name (Last, First, Middle Initial)  FRIENDS OF ERIK PAULSEN				
Mailing Address P.O. Box 44369 250 Prairie Center Drive				
ate	Zip Code		Transposition ID : 6476645	
N	55344	,	Transaction ID: 6476645	
		244		
Candidate Name				
		Category/	2000.00	
rimary	X General	Туре	, ,	
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ri tl	te N  her (spe	te Zip Code N 55344  ht For: 2014 imary General her (specify)	Category/ Type  Int For: 2014  Imary	

SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 20 OF 22				
IT	EMIZED DISBURSEMENTS	Use separate so for each categor		(check only	one)			
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F	NAME OF COMMITTEE (In Full)	o and address of	arry political	3311111111100 10	Solion Commission	iono nom odon committee.		
$ \rangle$	ST JUDE MEDICAL POLITICAL AG		MITTEE					
/	OT JUDE WILDIOAL POLITICAL A		IVII I E E					
	Full Name (Last, First, Middle Initial)							
Α.	Dan Coats For Indiana				Date of Disb	ursement		
	Mailing Address DOD 201111				M = M /	D D / Y Y Y Y Y		
	Mailing Address PO Box 301141				09	30 2014		
	City	State Zip C	ode			ID 0470055		
	Indianapolis	IN 4623			Transaction	n ID : 6476653		
	Purpose of Disbursement							
	On Edeba Name			011	Amount of E	ach Disbursement this Period		
	Candidate Name			Category/		2000.00		
	Sen. Daniel Coats  Office Sought: House Disbursen	nent For: 2014		Туре		7		
			General					
		Other (specify)						
	State: IN District:	· · · · · · · · · · · · · · · · · · ·						
	Full Name (Last, First, Middle Initial)							
В.	People for Patty Murray				Date of Disb	ursement		
	-				M = M /			
	Mailing Address 122 Maryland Avenue, NE				09	30 2014		
	City	State Zip C	ode		Transasti-	n ID : 6476657		
	Washington	DC 2000			iransactio	לניס 140 . עו וו		
	Purpose of Disbursement			011	Amount of F	ach Dichurcoment this Device		
	Candidate Name		L	011	Amount of E	ach Disbursement this Period		
	Ms. Patty Murray			Category/ Type	L	1000.00		
		nent For: 2016		.,,,,				
			General					
	President	Other (specify)	,					
_	State: WA District:							
_	Full Name (Last, First, Middle Initial)				D-1 (5):			
Ċ.	Donnelly for Indiana				Date of Disb			
	Mailing Address P.O. Box 891				M M / / 09	30 2014		
				2011				
	,	State Zip C	ode		Transactio	n ID : 6476658		
	Indianapolis	IN 4620	6		Hansaotto			
	Purpose of Disbursement	011	A	and Distriction of the Distriction				
	Candidate Name			Amount of E	ach Disbursement this Period			
	Mr. Joseph Donnelly			Category/ Type		2500.00		
	•	nent For: 2014		71				
			General					
		Other (specify)	,					
_	State: IN District:							
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[8	SUBTOTAL of Disbursements This Page (optional)			······		5500.00		
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SCHEDULE B (FEC Form 3X)	Harris A. C. C. C. C.	FOR LINE NUMBER: PAGE 21 OF 22				
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	(check only 21b 27				
Any information copied from such Reports and State						
or for commercial purposes, other than using the nar	ne and address of any polit	icai committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
$\Big angle$ ST JUDE MEDICAL POLITICAL A	CTION COMMITTE	= <b>E</b>				
Full Name (Last, First, Middle Initial)						
4. Wyden for Senate		Date of Disbursement				
Mailing Address 232 NE 9TH AVENUE			09 30 2014			
City	State Zip Code		T .: ID 0470070			
PORTLAND	OR 97232		Transaction ID: 6476659			
Purpose of Disbursement						
		011	Amount of Each Disbursement this Period			
Candidate Name		Category/	1000.00			
Mr. Ronald Wyden		Туре	1000.00			
Office Sought:  House Senate President  Disburse	ment For: 2016  Primary General  Other (specify) ▼					
State: OR District:						
Full Name (Last, First, Middle Initial)			Date of Disbursement			
Portman For Senate Committee	Portman For Senate Committee					
Mailing Address 9856 Archer Lane		09 30 2014				
City	State Zip Code		Transaction ID : 6476660			
Dublin	OH 43017		11ansaction ID : 047 0000			
Purpose of Disbursement		044	Assessed of Fook Diskussessed this Posied			
Candidate Name		011	Amount of Each Disbursement this Period			
Sen. Rob Portman		Category/	2000.00			
	ment For: 2014	Туре				
Senate President	Primary ☐ General  Other (specify) ▼					
State: OH District:  Full Name (Last, First, Middle Initial)						
ROBERTS, PAT			Date of Disbursement			
Mailing Address PO BOX 15		09 30 / 2014				
City	State Zip Code					
DODGE CITY	KS 67801		Transaction ID: 6476662			
Purpose of Disbursement						
	•					
Candidate Name		Category/				
Pat Roberts		Type	2500.00			
Senate President	ment For: 2014 Primary General Other (specify)					
State: KS District:						
SUBTOTAL of Disbursements This Page (optional)		·····	5500.00			
TOTAL This Period (last page this line number only	)					

SCHEDULE B (FEC Form 3X)	Llea caparete cabadula/a/	FOR LINE NUMBER: PAGE 22 OF 22				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		25 🗀 26		
	Detailed Summary Page	27		29 20 30b		
Any information copied from such Reports and St						
or for commercial purposes, other than using the	name and address of any politi	cal committee to	solicit contributions from such con	nmittee.		
NAME OF COMMITTEE (In Full)		: <b>-</b>				
$\left  ight>$ ST JUDE MEDICAL POLITICAL	. ACTION COMMINITE	.C				
Full Name (Last, First, Middle Initial)			D 1 (D)			
A. Al Franken for Senate 2014			Date of Disbursement			
Mailing Address 420 C Street			09 30 201			
City	State Zip Code		T			
Washington	DC 20002		Transaction ID: 6476663			
Purpose of Disbursement		011	Amount of Each Disbursement t	his Period		
Candidate Name		Category/	cart of East Blood contont	5 1 01100		
Mr. Al Franken		Type		1000.00		
	rsement For: 2014					
X Senate	Primary General					
State: MN District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
B. Tim Scott For Senate			Date of Disbursement	V		
Mailing Address 1405 Ashley River Road	09 30 2014					
City Charleston	State Zip Code SC 29407		Transaction ID : 6476666			
Purpose of Disbursement		011	Amount of Each Disbursement t	his Period		
Candidate Name		Category/				
Sen. Tim Scott		Type	7	2500.00		
	rsement For: 2014					
Senate President	Primary					
State: SC District:	Sales (openity)					
Full Name (Last, First, Middle Initial)						
C.			Date of Disbursement			
Mailing Address	Mailing Address					
City	State Zip Code					
Purpose of Disbursement	Purpose of Disbursement					
Candidate Name		Category/ Type	Amount of Each Disbursement t	his Period		
Office Sought: House Disbu	rsement For:	1,750				
Senate	Primary General					
President	Other (specify) ▼					
State: District:						
SUBTOTAL of Disbursements This Page (options	al)			3500.00		
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