

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 DEC -9 A 10:12

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <i>St. Jude Medical, Inc. Political Action Committee</i>		2. FEC IDENTIFICATION NUMBER <i>C00305029</i>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <i>One Rillehei Plaza</i>		
CITY, STATE and ZIP CODE <i>St. Paul, MN. 55117</i>		
3. <input checked="" type="checkbox"/> This committee has qualified as a mult candidate committee. (see FEC FORM 144)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:

- February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<i>7/1/99</i> through <i>12/31/99</i>		
6. (a) Cash on Hand January 1, 19 <i>99</i>			\$ <i>32.61</i>
(b) Cash on Hand at Beginning of Reporting Period		\$ <i>1,782.61</i>	
(c) Total Receipts (from Line 1B)		\$ <i>2,600.00</i>	\$ <i>5,100.00</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ <i>4,382.61</i>	\$ <i>5,132.61</i>
7. Total Disbursements (from Line 3D)		\$ <i>3,357.60</i>	\$ <i>3,357.60</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ <i>1,025.01</i>	\$ <i>1,025.01</i>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20483 Toll Free 800-424-9630 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Peter Gove

Signature of Treasurer

[Signature]

Date

11/27/2000

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3X

(revised 6/93)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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, Inc Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Butrecht for Congress P.O. Box 490 ST. Joseph, MI 49085	Contribution to Fundraising 1ST District - MN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/27/99	\$ 500.00
Ruther for Congress 1399 Geneva Avenue N, Suite 103 Oakdale, MN 55125	Contribution to Fundraising 6th District - MN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/23/99	\$ 500.00
Anna Eshoo for Congress 103 Cannon House Office Bldg. Washington, D.C. 20515-2305	Contribution to Fundraising 14th District - CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/23/99	\$ 500.00
Thomas for Congress Box 395 Bakersfield, CA 93302	Contribution to Fundraising 21st District - CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/23/99	\$ 1,000.00
Jim Ramstad Volunteer Committee 2231 Rayburn House Office Bldg. Washington, D.C. 20515	Contribution to Fundraising 3rd District - MN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/99	\$ 500.00
Ruther for Congress 1399 Geneva Ave. North, Suite 103 Oakdale, MN 55125	Contribution to Fundraising 6th District - MN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/1/99	\$ 250.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$ 3,250.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) <i>12-6-00</i>
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JMU</i> PREPARER	<i>12-9-00</i> DATE PREPARED