FEC FORM 3X	AN	EPORT O ID DISBU Other Than A	JRSEM	ENTS	ee	Off	ice Use Only
1. NAME OF COMMITTEE (in fu		FEC MAILING LA		ample:If typing er the lines	, type		
ADDRESS (number and	street)	266 KIFER ROAD	BLDG 101				
Check if differ than previously reported. (ACC	/						94086
2. FEC IDENTIFICAT	ION NUMBER	₩	CITY 🛋		S	TATE	ZIPCODE 🔺
C00462622	• • • •		3. IS THIS REPORT		NEW N) OR	AMEN (A)	DED
July 15		(b) Monthly Report Due On: (c) 12-Day PRE-Elec	Feb 20 (M2 Mar 20 (M3 Apr 20 (M4)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Aug 20 (Sep 20 (Oct 20 (I General (12G	M9) Vear Only) M9) Dec 20 (M12) (Non-Election Year Only) M10) Jan 31 (YE)
X October Quarterly January 3 Quarterly July 31 M Report(N Year Only	15 Report(Q3) 31 Report(YE) lid-Year on-election	(d) 30-Day Post -Ele Report for	Election on	Convention (General (300		Special (12G)	in the State of Special (30S)
5. Covering Period	07	01 20	0 9	through	12		0 0 9
I certify that I have exam Type or Print Name of T		rt and to the best of Marshall L. Mohr	my knowledge	and delief it is	true, correct a	na complete.	
Signature of Treasurer	Electronically	y Filed by Marsh	all L. Mohr		Da	ate 01	26 2010
NOTE : Submission of f	alse, erroneous	s, or incomplete info	ormation may s	ubject the pers	on signing this	Report to the pen	alties of 2 U.S.C 437g.
Office Use Only						F	EC FORM 3X (Rev. 12/2004)

Image# 10990156093

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

2 / 19

1	Write or Type Committee Name INTUTIVE SURGICAL INC PAC		
l	Report Covering the Period: From:	D D Y Y Y Y 01 2009	Го: M M M D D D Y Y Y Y Y 3 1 2 3 1 2 0 0 9
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2009 Y Y Y		0.00
	(b) Cash on Hand at Begining of Reporting Period	29580.00	
	(c) Total Receipts (from Line 19)	45340.00	79720.00
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	74920.00	79720.00
7.	Total Disbursements (from Line 31)	11390.75	16190.75
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	63529.25	63529.25
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X 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

FE6AN026

Image# 1099	9015609	94
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DETAILED SUMMARY PAGE OF RECEIPTS

3/19 FEC Form 3X (Rev. 06/2004) Write or Type Committee Name INTUTIVE SURGICAL INC PAC м м 07 01 м м 12 3^D1 D 2009 D 2009 To: Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period Calendar Year-to-Date** 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 43800.00 77800.00 (i) Itemized (use Schedule A) 1540.00 1920.00 (ii) Unitemized (iii) TOTAL (add 45340.00 79720.00 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 45340.00 79720.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 45340.00 79720.00 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 45340.00 79720.00 (subtract Line 18(c) from Line 19)

Image# 10990156095

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)		of Disbursements	4 / 19
	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Deperating Expenditures: — a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	5.00
	(ii) Non-Federal Share	0.00	0.00
(1	b) Other Federal Operating Expenditures	0.00	0.00
(0	c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) >	0.00	0.00
	ransfers to Affiliated/Other Party	0.00	0.00
	Contributions to ederal Candidates/Committees nd Other Political Committees	11300.00	16100.00
24. Ir (เ	ndependent Expenditure use Schedule E)	0.00	0.00
25. Č C	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) use Schedule F)	0.00	0.00
	oan Repayments Made	0.00	0.00
27. L	oans Made	0.00	0.00
	Refunds of Contributions To: a) Individuals/Persons Other Than Political Committees	0.00	0.00
(t	Political Party Committees	0.00	0.00
	c) Other Political Committees (such as PACs)	0.00	0.00
(0	 d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) 	0.00	0.00
29. C	ther Disbursements	90.75	90.75
	Federal Election Activity (2 U.S.C 431(20)) (a) Shared 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
	Total Disbursements (add Lines 21(c), 22,		
:	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	11390.75	16190.75
	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	11390.75	16190.75

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003) of Disbursements

5 / 19

	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)	45340.00	79720.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	45340.00	79720.00
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

FE6AN026

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 19 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) INTUTIVE SURGICAL INC PAC	statements may e name and add	y not be sold or used by any persiders of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Α.	/ Full Name (Last, First, Middle Initial) Ryan Barrett Mailing Address 117 Kodiak Way #2101 City	State	Zip Code	Date of Receipt $\begin{bmatrix} M & M \\ 0 & 8 \end{bmatrix} / \begin{bmatrix} D & D \\ 0 & 7 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{bmatrix}$ Transaction ID: SA11AI.4220
	Waltham FEC ID number of contributing federal political committee.	C	02451	Amount of Each Receipt this Period 250.00
	Name of Employer Intuitive Surgical, Inc. Receipt For: Primary General Other (specify)	1 · · · · ·	n , Clinical Sales e Year-to-Date 250.00]
В.	Full Name (Last, First, Middle Initial) Sandra M. Besch Mailing Address 1277 Jersey St	•		Date of Receipt
	City Denver FEC ID number of contributing federal political committee.	State CO	Zip Code 80220	Transaction ID: SA11AI.4184 Amount of Each Receipt this Period 1000.00
	Name of Employer Event Networks Inc Receipt For: Primary General	Occupatio Manager Aggregate	e Year-to-Date 🔻	1
С.	Cther (specify) ▼ Full Name (Last, First, Middle Initial) Aleksandar Cukic	0.0	1000.00	Date of Receipt
	Mailing Address 327 4 Mile Road	State	Zip Code	M M / D D / Y
	Racine FEC ID number of contributing federal political committee.	C	53402	Amount of Each Receipt this Period
	Name of Employer Intuitive Surgical, Inc. Receipt For:	1 1	n sident Strategy Year-to-Date V	
ſ	 Primary General Other (specify) ▼ 	0.0	1500.00	
	SUBTOTAL of Receipts This Page (optional)		I	2750.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 7/19
	· · · ·		Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 1
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	y not be sold or used by any p dress of any political committe	erson for the purpose of soliciting contributions be to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	> INTUTIVE SURGICAL INC PAC			
Α.	Full Name (Last, First, Middle Initial) Timothy V. Doherty			Date of Receipt
	Mailing Address 6 Santa Victoria Ct			M M / D D / Y
	City	State	Zip Code	Transaction ID: SA11AI.4194
	Novato	CA	94945	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Intuitive Surgical, Inc.	Occupatio		
	Receipt For:		of Lab Services	
	Primary General	Aggregate	e Year-to-Date	
	Other (specify) ▼	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) Christopher Dunn	•		Date of Receipt
	Mailing Address 328 Garden St. Unit 2			M M / D D / Y Y Y Y 10 31 2009
	City	State	Zip Code	Transaction ID: SA11AI.4251
	Hobeken	NJ	07030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		400.00
	Name of Employer Intuitive Surgical, Inc.	Occupation Area Sal	n es Manager	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		400.00	
C.	Full Name (Last, First, Middle Initial) Gary C. Ettinger	1		Date of Receipt
	Mailing Address 10948 Sycamore Dr.			07 09 2009
	City	State	Zip Code	Transaction ID: SA11AI.4181
	Cupertino	CA	95014-6560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Intuitive Surgical, Inc.	Occupation Sr. Mech	n anical Engineer	
	Receipt For:	Aggregate	e Year-to-Date	
	Other (specify) ▼	0 0	250.00	
	SUBTOTAL of Poppinto This Page (antional)	1		900.00
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			900.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 19 (check only one) (check 112) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) INTUTIVE SURGICAL INC PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions
A. Full Name (Last, First, Middle Initial) Craig Ferluge Mailing Address 457 Rugby Rd City Brooklyn	State Zip Code NY 11226	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer Intuitive Surgical, Inc. Receipt For: Primary General Other (specify) ▼	C Occupation Clinical Sales Rep Aggregate Year-to-Date ▼ 225.00	75.00
Full Name (Last, First, Middle Initial) Craig Ferluge Mailing Address 457 Rugby Rd City Brooklyn FEC ID number of contributing federal political committee. Name of Employer Intuitive Surgical, Inc. Receipt For: Primary General Other (specify) ▼	State Zip Code NY 11226 C Occupation Clinical Sales Rep Aggregate Year-to-Date 300.00	Date of Receipt
C. Full Name (Last, First, Middle Initial) Craig Ferluge Mailing Address 457 Rugby Rd City Brooklyn FEC ID number of contributing federal political committee. Name of Employer Intuitive Surgical, Inc. Receipt For: Primary General Other (specify) ▼	State Zip Code NY 11226 C Occupation Clinical Sales Rep Aggregate Year-to-Date 375.00	Date of Receipt
SUBTOTAL of Receipts This Page (optiona)	225.00

	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 9 / 19 (check only one)
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
	Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) INTUTIVE SURGICAL INC PAC		
۷. ۲.	Full Name (Last, First, Middle Initial) Craig Ferluge		Date of Receipt
	Mailing Address 457 Rugby Rd		1 2 D D / Y Y Y Y 1 2 3 1 2 0 0 9
	City	State Zip Code	Transaction ID: SA11AI.4261
	Brooklyn	NY 11226	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	75.00
	Name of Employer Intuitive Surgical, Inc.	Occupation Clinical Sales Rep	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	450.00	
	Full Name (Last, First, Middle Initial) Davinder Gupta	1	Date of Receipt
	Mailing Address 855 Pacheco Dr.		M M / D D / Y
	City	State Zip Code	Transaction ID: SA11AI.4231
	Milpitas	CA 95035-4523	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Intuitive Surgical, Inc.	Occupation Director of IT	
	Receipt For:	Aggregate Year-to-Date V	_
	Primary General Other (specify) ▼	1000.00	
_	Full Name (Last, First, Middle Initial) Dianne P. Halvorson	1	Date of Receipt
	Mailing Address 950 Corte Augusta		M M / D D / Y Y Y Y 0 8 0 3 2 0 0 9
	City	State Zip Code	Transaction ID: SA11AI.4204
	Camarillo	CA 93010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Spouse of Board Member	Occupation Homemaker	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	
Γ		I	2075.00

SC	HEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 10 / 19
	•		Use separate schedule(s) for each category of the	(check only one)
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
	r information copied from such Reports and St or commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full)			
	INTUTIVE SURGICAL INC PAC			
а.	Full Name (Last, First, Middle Initial) Eric H. Halvorson			Date of Receipt
	Mailing Address 950 Corte Augusta			M · M / D · D / Y · Y · Y · Y Y 0 8 / 0 3 2 0 0 9
	City	State	Zip Code	Transaction ID: SA11AI.4202
	Camarillo	CA	93010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupatio	n	-
	Name of Employer Board Member - Intuitive		Directors - Intuitive	
	Receipt For:		e Year-to-Date V	_
	Primary General	Ayyreyalt		
	Other (specify)	0 0	1000.00	
 3.	Full Name (Last, First, Middle Initial) Brandon D. Itkowitz			Date of Receipt
	Mailing Address 1249 Lakeside Dr. Apt 1050			M M / D D / Y Y Y Y 0 8 07 2009
	City	State	Zip Code	Transaction ID: SA11AI.4216
	Sunnyvale	CA	94085	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Intuitive Surgical, Inc.	Occupatio Sr. Softv	n vare Engineer	
	Receipt For:		e Year-to-Date 🔻	_
	Primary General	, iggi oguit		1
	Other (specify)	0 0	250.00	
	Full Name (Last, First, Middle Initial) Daniel Jones			Date of Receipt
	Mailing Address 716 South Overlook Dr	ive		M M / D D / Y Y Y Y 07 02 2009
	City	State	Zip Code	Transaction ID: SA11AI.4170
	Alexandria	VA	22305	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2000.00
	Name of Employer Intuitive Surgical, Inc	Occupatio Director,	n IP Development	
	Receipt For:	_ I	e Year-to-Date 🔻	7
	Primary General Other (specify) ▼		2000.00]
	IPTOTAL of Doppinto This Dopp (antispel)			3250.00
	JBTOTAL of Receipts This Page (optional)		·····	
т	DTAL This Period (last page this line number of	only)		

City State Zip Code Transaction ID: SA11AL/175 Alexandria VA 22305 Amount of Each Receipt this Perio FEC. ID number of contributing federal political committee. C Amount of Each Receipt this Perio Name of Employer Substitute Teacher Occupation Part-Time Teacher Aggregate Year-to-Date ✓ Receipt For: Aggregate Year-to-Date ✓ Ø Ø Other (specify) ▼ State Zip Code Transaction ID: SA11AL/4214 Mailing Address 7791 SW 57th Ln Ø	19
Are information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution from such committee NAME OF COMMITTEE (in Full) INTUTIVE SURGICAL INC PAC A. Full Name (Last, First, Middle Initial) Pameta W. Jones Mailing Address 715 South Overlook Drive City State Zip Code Name of Employer Occupation Primary General Other (specify) ▼ State Zip Code Name (Last, First, Middle Initial) Primary General Other (specify) ▼ Cocupation Part-Time Teacher Pecelpt For: Primary General Other (specify) ▼ 2000.00 Full Name (Last, First, Middle Initial) Kathyn G. Lyail Mailing Address T791 SW 57th Ln City State Zip Code Receipt for: Occupation Primary General Occupation Primary General Occupation Other (specify) ▼ Aggregate Year-to-Date	
INTUTIVE SURGICAL INC PAC Full Name (Last, First, Middle Initial) Pamela W. Jones Mailing Address 716 South Overlook Drive City State Zip Code A. Area of Encloyer O 0 2 / 2000 FEC ID number of contributing federal political committee. C Primary Occupation Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General City State <zip code<="" td=""> Mailing Address 7791 SW 57th Ln Model Initial) City State<zip code<="" td=""> Mailing Address 7791 SW 57th Ln C City State<zip code<="" td=""> Mailing Address 7791 SW 57th Ln C City State<zip code<="" td=""> Mailing Address 272 E. Village Rd C City State<zip code<="" td=""> Mailing Address 272 E. Village Rd State<zip code<="" td=""> City State<zip code<="" td=""> Mailing Address 272 E. Village Rd C City State<zip code<="" td=""> Primary General C Other (specify) ◆ State<zip code<="" td=""> State<zip code<="" td=""> <</zip></zip></zip></zip></zip></zip></zip></zip></zip></zip>	IS
A. Pamela W.Jones Date of Receipt Mailing Address 716 South Overlook Drive 0 0 1 2 0 0 City State Zip Code A. Pamela W.Jones C City State Zip Code Prescription Prescription Prescription FEC ID number of contributing federal political committee C Prescription Name of Employer Occupation Part-Time Teacher Primary General Opposite Year-to-Date V Other (specify) Image of Receipt Date of Receipt Mailing Address 7791 SW 57th Ln Date of Receipt City State Zip Code Transaction ID: SA11A1.4214 Amount of Each Receipt Inis Perio C Transaction ID: SA11A1.4214 Amount of Each Receipt Inis Perio C Transaction ID: SA11A1.4214 Amount of Each Receipt Inis Perio South Receipt Inis Perio South Receipt Inis Perio City State Zip Code Transaction ID: SA11A1.4214 Amount of Each Receipt Inis Perio South Receipt Inis Perio South Receipt Inis Perio Primary General S	
City State Zip Code Transaction ID: SA11AL.4175 Alexandria VA 22305 Amount of Each Receipt this Perio FEC ID number of contributing federal political committee. C 2000.0 Name of Employer Substitute Teacher Occupation Part-Time Teacher Aggregate Year to Date ▼ 2000.00 Receipt For: Other (specify) ▼ 2000.00 Date of Receipt Mailing Address 7791 SW 57th Ln 0 ° ° / 2 ° ° City State Zip Code Name of Employer Intuitive Surgical, Inc. C Transaction ID: SA11AL.4214 Mailing Address 2791 SW 57th Ln 0 ° ° / 2 ° ° City State Zip Code Name of Employer Intuitive Surgical, Inc. Occupation Clinical Sales Rep Transaction ID: SA11AL.4214 Amount of Each Receipt I w Aggregate Year-to-Date ▼ 5000.00 Full Name (Last, First, Middle Initial) Soct Manzo Date of Receipt Mailing Address 272 E. Village Rd C Transaction ID: SA11AL.4198 Amount of Each Receipt Ithis Perio 0 ° ° ′ ° ° ° ′ 2 ° ′ 2 0 ° Transaction ID: SA11AL.4198 Shelton C 0 6 6 6 6 6 6 6 6 6 6 6 6 6 6	
Alexandria VA 22305 Amount of Each Receipt this Perio FEC ID number of contributing federal political committee. C 2000.0 Name of Employer Occupation Part-Time Teacher 2000.00 Receipt For: Part-Time Teacher Aggregate Year-to-Date ▼ Date of Receipt Mailing Address 7791 SW 57th Ln Milling Address 7791 SW 57th Ln City State Zip Code Tansaction ID: SA11AI.4214 Gainesville FL 32608 Amount of Each Receipt this Perio FEC ID number of contributing federal political committee. Occupation Milling Address 2000.00 Name of Employer Occupation C Tansaction ID: SA11AI.4214 Amount of Each Receipt this Perio Gainesville FL 32608 Feelopt Amount of Each Receipt this Perio Name of Employer Occupation C Tansaction ID: SA11AI.4214 Amount of Each Receipt this Perio Name of Employer Aggregate Year-to-Date ▼	9 [°]
FEC ID number of contributing federal political committee. C 2000.0 Name of Enployer Substitute Teacher Occupation Part-Time Teacher 2000.00 Receipt For: Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt B. Full Name (Last, First, Middle Initial) Date of Receipt City State Zip Code FEC ID number of contributing federal political committee. C Transaction ID: SA11AI.4214 Amount of Eachpage Occupation Clinical Sales Rep Aggregate Year-to-Date ▼ Transaction ID: SA11AI.4214 Amount of Each Receipt For: Primary General Other (specify) ▼ Occupation Clinical Sales Rep Date of Receipt Receipt For: Primary General Other (specify) ▼ Occupation Clinical Sales Rep Date of Receipt Mailing Address 272 E. Village Rd C Date of Receipt Date of Receipt City State Zip Code Transaction ID: SA11AI.4198 Amount of Each Receipt this Perio Shelton C 06844 C 027 / 2.0.0 200.0 City State Zip Code Transaction ID: SA11AI.4198 Amount of Each Receipt this Perio Shelton C 06484 C 20	
federal political committee. C Name of Employer Substitute Teacher Part-Time Teacher Receipt For: Part-Time Teacher Part-Time Teacher Aggregate Year-to-Date ▼ City State Zip Code City State Zip Code Receipt For: PL 32608 FEC ID number of contributing federal political committee. C Name of Employer Intuitive Surgical, Inc. Occupation Clinical Sales Rep Aggregate Year-to-Date Receipt For: Aggregate Year-to-Date ✓ Primary General Occupation Clinical Sales Rep Date of Receipt Receipt For: Aggregate Year-to-Date ✓ 5000.00 Full Name (Last, First, Middle Initial) Scott Marzo Date of Receipt Date of Receipt Mailing Address 272 E. Village Rd CT 06484 Amount of Each Receipt His Perio City State Zip Code Tansaction ID: SA11Al.4198 Amount of Each Receipt His Perio 2000.0 Tansaction ID: SA11Al.4198 Amount of Each Receipt His Perio 2000.0 Tansaction ID: SA11Al.4198 Amount of Each Receipt His Perio 2000.0 2000.0<	ł
Substitute Teacher Part-Time Teacher Receipt For: Aggregate Year-to-Date ▼ Other (specify) ▼ 2000.00 Kathryn G. Lyall Date of Receipt Mailing Address 7791 SW 57th Ln 0 0 7 / 2 0 0 City State Zip Code Gainesville FL 32608 PEC ID number of contributing federal political committee. C Transaction ID: SA11Al.4214 Amount of Each Receipt this Perio Cinical Sales Rep 5000.0 Name of Employer Occupation Cinical Sales Rep Date of Receipt Name of Last, First, Middle Initial) Aggregate Year-to-Date ▼ Date of Receipt 0 7 / 2 0 0 Scott Manzo Aggregate Year-to-Date ▼ Date of Receipt 0 7 / 2 7 / 2 0 0 Mailing Address 272 E. Village Rd City State Zip Code Shelton CT 06484 Amount of Each Receipt this Perio 2000.0 FEC ID number of contributing federal political committee. C 2000.0 7 / 2 0 0 Mailing Address 272 E. Village Rd 0 0 7 / 2 7 / 2 0 0 7 / 2 0 0 Mailing Address 272 E. Village Rd 0 0 0 0 0	0
Receipt For: Aggregate Year-to-Date ✓ Other (specify) ▼ 2000.00 Full Name (Last, First, Middle Initial) Date of Receipt Kathryn G. Lyall Date of Receipt Mailing Address 7791 SW 57th Ln City State Zip Code FEC ID number of contributing federal political committee. C Transaction ID: SA11AI.4214 Amount of Each Receipt this Perio State Zip Code Name of Employer Occupation State State Primary General Occupation State State Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt Receipt For: Occupation State State State State State State Transaction ID: SA11AI.4214 Aggregate Year-to-Date ▼ State State State State Transaction ID: Sati AI.4214 Aggregate Year-to-Date ▼ State State State Transaction ID: Sati AI.41438 Mailing Address 272 E. Village Rd Transaction ID: Sati AI.4138 Amount of Each Receipt this Perio City State </td <td></td>	
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Primary General Other (specify) ▼	
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TOTAL This Period (last page this line number only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 19 (check only one) 11c 12 X 11a 11b 11c 12
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to s	13 14 15 16 17 n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) INTUTIVE SURGICAL INC PAC		
∠ A.	Full Name (Last, First, Middle Initial) Julia Marquardt		Date of Receipt
	Mailing Address 50 North Pine Circle		08 / D D / Y Y Y Y 08 27 2009
	City	State Zip Code	Transaction ID: SA11AI.4227
	Belleair	FL 33756-1512	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Intuitive Surgical, Inc.	Occupation Key Accounts Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
- В.	Full Name (Last, First, Middle Initial) Jerome J. McNamara		Date of Receipt
	Mailing Address 3072 NW 60th St		M M / D D / Y
	City	State Zip Code	Transaction ID: SA11AI.4206
	Boca Raton	FL 33496	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	5000.00
	Name of Employer Intuitive Surgical, Inc.	Occupation Executive Vice President, WW Sales	_
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	5000.00	
– C.	Full Name (Last, First, Middle Initial) Sally K. McNamara		Date of Receipt
	Mailing Address 3072 NW 60th Street		M M / D D / Y Y Y Y 08 03 2009
	City	State Zip Code	Transaction ID: SA11AI.4208
	Boca Raton	FL 33496	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	5000.00
	Name of Employer Spouse of Intuitive Emplo- vee	Occupation Homemaker	
	Receipt For:	Aggregate Year-to-Date V	_
	Primary General Other (specify) ▼	5000.00	
ſ	SUBTOTAL of Receipts This Page (optional)	L	10500.00
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	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 13 / 19
	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	
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	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		
	> INTUTIVE SURGICAL INC PAC		
<i>А</i> .	Full Name (Last, First, Middle Initial) John Murtha		Date of Receipt
	Mailing Address 1087 Konstanz Ter		07 / D D / Y Y Y Y 07 17 2009
	City	State Zip Code	Transaction ID: SA11AI.4188
	Sunnyvale	CA 94089-2126	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1500.00
	Name of Employer Intuitive Surgical, Inc.	Occupation VP Continuous Improvement	_
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	1500.00]
B.	Full Name (Last, First, Middle Initial) Nancy Murtha		Date of Receipt
	Mailing Address 1087 Konstanz ter		M M / D D / Y Y Y Y 07 17 2009
	City	State Zip Code	Transaction ID: SA11AI.4186
	Sunnyvale	CA 94089-2126	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1500.00
	Name of Employer Spouse of Intuitive Surgi- <u>cal</u>	Occupation Homemaker	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) Image: Content of the specific spec	1500.00	
С.	Full Name (Last, First, Middle Initial) Travis Murtha		Date of Receipt
	Mailing Address 1 Pearl Street		M M / D D / Y Y Y Y 07 17 2009
	City	State Zip Code	Transaction ID: SA11AI.4182
	Denver	CO 80203	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Wood, Ris & Hames	Occupation Legal Staff-Attorney	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	
	SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	4000.00
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of solding contributions from such committee. NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) NATURY SURGICAL INC PAC Full Name (Last, First, Middle Initia) Eugeno T, Nagel Mailing Address City State City State PEC: Do number of contributing federal political committee. Occupation Mailing Address Period (State) Period (State) Primary General Official committee. Occupation Mailing Address State Zp Code State Special for Poil Name (Last, First, Middle Initial) Address 3335 Machado Ave City State State Zp Code State Zp Code State Zp Code State Zp Code Mailing Address 3335 Machado Ave City State Zp Code Mailing Address 3335	SCHEDULE A (FEC F ITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 19 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
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	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) INTUTIVE SURGICAL INC PAC		
لا ۹.	, Full Name (Last, First, Middle Initial) Arturo C. Racelis		Date of Receipt
	Mailing Address 3335 Machado Ave		12 ^{//} 16 ^{//} 2009
	City	State Zip Code	Transaction ID: SA11AI.4260
	Santa Clara	CA 95051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Intuitive Surgical, Inc.	Occupation Supplier Quality Engineer	-
	Receipt For:	Aggregate Year-to-Date ▼	1
	Primary General Other (specify) ▼	500.00	
- 3.	Full Name (Last, First, Middle Initial) Heather Rider		Date of Receipt
	Mailing Address 4421 Granger St.		10 [/] 26 [/] 2009
	City	State Zip Code	Transaction ID: SA11AI.4247
	San Diego	CA 92107	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2000.00
	Name of Employer Intuitive Surgical, Inc.	Occupation Vice President of Human Resources	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	2000.00	
- ;.	Full Name (Last, First, Middle Initial) Mark J. Rubash		Date of Receipt
	Mailing Address 3392 Monte Sereno Te	errace	07 / 20 / Y Y Y Y 099
	City	State Zip Code	Transaction ID: SA11AI.4190
	Fremont	CA 94539	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	5000.00
	Name of Employer Shutterfly	Occupation Chief Financial Officer	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	5000.00	
Γ	SUBTOTAL of Receipts This Page (optional)	L	7100.00
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SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 19 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin	and Statements may not be sold or used by any person g the name and address of any political committee to s	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) INTUTIVE SURGICAL INC PAC		
Full Name (Last, First, Middle Initial) Andy Sale		Date of Receipt
Mailing Address 1706 Championsh	ip Blvd	08 / D D / Y Y Y Y 08 20 2009
City	State Zip Code	Transaction ID: SA11AI.4222
Franklin	TN 37064	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Intuitive Surgical, Inc.	Occupation Area Vice President	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) David Stoffel		Date of Receipt
Mailing Address 9913 Holt Rd		07 / 08 / Y Y Y Y 099
City	State Zip Code	Transaction ID: SA11AI.4179
Carmel	CA 93923	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Intuitive Surgical, Inc.	Occupation Sr. Director, New Business Developme	ent
Receipt For:	Aggregate Year-to-Date V	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Joellen V. Stoffel		Date of Receipt
Mailing Address 9913 Holt Road		07 08 YYYY 099
City	State Zip Code	Transaction ID: SA11AI.4180
Carmel	CA 93923	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Menlo Medical Clinic	Occupation Dematologist	
Receipt For:	Aggregate Year-to-Date 🔻	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (option	ial)	2000.00
	nber only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and add	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any pers dress of any political committee to	FOR LINE NUMBER: PAGE 17 / 19 (check only one) 11a X 11a 13 14 15 16 17 on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)			
Α.	Karen Uyesugi Mailing Address 5 Weber Lane			Date of Receipt
	City Coto De Caza	State CA	Zip Code 92679	Transaction ID: SA11AI.4200 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Intuitive Surgical, Inc.		latory Affairs	
	Receipt For: Primary General Other (specify) $rac{1}{rac$	Aggregate	P Year-to-Date ▼ 1000.00	
B.	Full Name (Last, First, Middle Initial) Dave Vort			Date of Receipt
	Mailing Address 625 Guinda St.			M M / D D / Y Y Y Y 09 07 2009
	City	State	Zip Code	Transaction ID: SA11AI.4237
	Palo Alto	CA	94301	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Intuitive Surgical, Inc.	Occupatio Director	n of Area Sales	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	►	1300.00
TOTAL This Period (last page this line number only)	►	43800.00

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FEC Schedule B (Form 3X) (Revised 02/2003)

Detailed Summary Page 21b 22 X 23 24 25 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for some committee to solicit contributions from such committee 28a 28b 28c 29 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee Solicit contributions from such committee NAME OF COMMITTEE (In Full) INTUTIVE SURGICAL INC PAC Transaction ID: SB23.4270 Full Name (Last, First, Middle Initial) NANCY PELOSI FOR CONGRESS Transaction ID: SB23.4270 Mailing Address 607 14th Street, NW 20005 City State Zip Code Washington DC 20005 Purpose of Disbursement Category/ Type 2400.00 Office Sought: House Disbursement For: 2010 State: District: Cher (specify) ▼ Transaction ID: SB23.4273 Full Name (Last, First, Middle Initial) NANCY PELOSI FOR CONGRESS Transaction ID: SB23.4273 Mailing Address 607 14th Street, NW 0 7 ^M / ^D 0 ^O / ^Y / ^Y 2 0 ^Y 9 ^Y Mailing Address 607 14th Street, NW	SCHEDULE B (FEC TEMIZED DISBUR			arate schedule(s) category of the		(check	only	- ′	ER:					19 / 1	_	
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FEC Schedule B (Form 3X) (Revised 02/2003)