

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines St Jude Medical Political Action Committee

ADDRESS (number and street) One Lillehei Plaza St Paul MN 55117 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00305029 3. IS THIS REPORT X NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Convention (12C), Special (12S), Runoff (12R) Election on 11 02 2010 in the State of (d) 30-Day Post -Election Report for the: General (30G), Runoff (30R), Special (30S) Election on in the State of

5. Covering Period 10 01 2010 through 10 13 2010

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 Robert G Frenz

Signature of Treasurer Electronically Filed by Robert G Frenz Date 10 18 2010

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

Table with 10 columns and 1 row. Office Use Only. FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
St Jude Medical Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		9575.01
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	33057.03									
(c) Total Receipts (from Line 19)	584.43	50066.45								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	33641.46	59641.46								
7. Total Disbursements (from Line 31)	0.00	26000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	33641.46	33641.46								
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									

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

Write or Type Committee Name
St Jude Medical Political Action Committee

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	497.93	44373.85
(ii) Unitemized	86.50	5692.60
(iii) TOTAL (add Lines 11(a)(i) and (ii)	584.43	50066.45
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	584.43	50066.45
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	584.43	50066.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	584.43	50066.45

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	26000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. 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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	0.00	26000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	26000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	584.43	50066.45
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	584.43	50066.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
St Jude Medical Political Action Committee

A.	Full Name (Last, First, Middle Initial) Scott Brown		Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 2031 E Coconino Ct.		Transaction ID: SA11AI.4981
	City Gilbert	State AZ	Zip Code 85297
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.50
	Name of Employer St Jude Medical	Occupation Sales - Cardiovascular	Payroll \$16.50 Bi-weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 247.50	

B.	Full Name (Last, First, Middle Initial) Thaddeus Cochran		Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 605 Johnstone Drive		Transaction ID: SA11AI.4984
	City Madison	State MS	Zip Code 39110
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90.00
	Name of Employer St Jude Medical	Occupation VP, Area Sales	Payroll \$90.00 Bi-weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1260.00	

C.	Full Name (Last, First, Middle Initial) Angela Craig		Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 1966 Princeton Ave.		Transaction ID: SA11AI.4985
	City St. Paul	State MN	Zip Code 55105
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer St Jude Medical	Occupation VP, Corporate Relations	Payroll \$50.00 Bi-weekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional)	▶	156.50
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 10
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
St Jude Medical Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lynne Eilerman	Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 2136 Datura Street	Transaction ID: SA11AI.4988
	City State Zip Code Sarasota FL 34239	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Payroll \$25.00 Bi-weekly
	Name of Employer St Jude Medical Occupation Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00

B.	Full Name (Last, First, Middle Initial) Marc Gauthier	Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 414 Stonebridge Crichel	Transaction ID: SA11AI.4989
	City State Zip Code Allen TX 75013	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll \$20.00 Bi-weekly
	Name of Employer St Jude Medical Occupation NMD Dir. Software Engineering Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

C.	Full Name (Last, First, Middle Initial) Matt Hardie	Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 235 St Andrews	Transaction ID: SA11AI.4991
	City State Zip Code Calhoun LA 71225	Amount of Each Receipt this Period 47.62
	FEC ID number of contributing federal political committee. C	Payroll \$47.62 Bi-weekly
	Name of Employer St Jude Medical Occupation Director Regional Sales - CRM Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 714.30

SUBTOTAL of Receipts This Page (optional)	92.62
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 10
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
St Jude Medical Political Action Committee

A.

Full Name (Last, First, Middle Initial)
William Hautt

Mailing Address 5569 Nakoma

City State Zip Code
Dallas TX 75209

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

Name of Employer Occupation
St Jude Medical NMD Regional Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
10 / 01 / 2010

Transaction ID: SA11AI.4992

Amount of Each Receipt this Period
25.00

Payroll \$25.00 Bi-weekly

B.

Full Name (Last, First, Middle Initial)
David Hendrick

Mailing Address 2204 Demona Drive

City State Zip Code
Austin TX 78733

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
10 / 01 / 2010

Transaction ID: SA11AI.4993

Amount of Each Receipt this Period
50.00

Payroll \$50.00 bi-weekly

C.

Full Name (Last, First, Middle Initial)
Scott Holstine

Mailing Address 6200 Suter Parkway

City State Zip Code
Austin TX 78735

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

Name of Employer Occupation
St Jude Medical USD AVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
10 / 01 / 2010

Transaction ID: SA11AI.4994

Amount of Each Receipt this Period
25.00

Payroll \$25.00 bi-weekly

SUBTOTAL of Receipts This Page (optional) ► **100.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 10
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
St Jude Medical Political Action Committee

A.	Full Name (Last, First, Middle Initial) Raymond Leonard	Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 11830 RiverOaks Drive	Transaction ID: SA11AI.4995
	City Loveland State OH Zip Code 45140	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Payroll \$25.00 bi-weekly
	Name of Employer St Jude Medical USD Occupation Sales Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) Tom Northenscold	Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 1215 Oakview Lane N	Transaction ID: SA11AI.4997
	City Plymouth State MN Zip Code 55441	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll \$50.00 bi-weekly
	Name of Employer St Jude Medical Occupation VP., IT & CIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

C.	Full Name (Last, First, Middle Initial) Armotta Porter	Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 10165 31st Court NE	Transaction ID: SA11AI.4998
	City St Michael State MN Zip Code 55376	Amount of Each Receipt this Period 23.81
	FEC ID number of contributing federal political committee. C	Payroll \$23.81 bi-weekly
	Name of Employer St Jude Medical Occupation Dir. Academic Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 357.15	

SUBTOTAL of Receipts This Page (optional)	▶	98.81
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 10
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
St Jude Medical Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Bernadette Sowder

Mailing Address 11665 Log Jump Tr.

City State Zip Code
Ellicott MD 21042

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

Name of Employer Occupation
St Jude Medical USD Sales Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.5002

Amount of Each Receipt this Period
25.00

Payroll \$25.00 bi-weekly

B.

Full Name (Last, First, Middle Initial)
Michael Tuckerman

Mailing Address 11602 Claymont Circle

City State Zip Code
Windermere FL 34786

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

Name of Employer Occupation
St Jude Medical Director Regional Sales - CRM

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.5004

Amount of Each Receipt this Period
25.00

Payroll \$25.00 bi-weekly

SUBTOTAL of Receipts This Page (optional)	▶	50.00
TOTAL This Period (last page this line number only)	▶	497.93