07/26/2011 14:52

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Medical Device Manufacturers Association PAC P.O. Box 34591 ADDRESS (number and street) Check if different than previously DC 20043 Washington reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00484162 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year Х (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 0 1 2011 06 3 0 2011 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Nancy Cushman Type or Print Name of Treasurer Electronically Filed by Nancy Cushman 07 26 2011 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Medical Device Manufacturers Association PAC м м 0 1 Y W Y 2011 м м 0 6 ^D 30 D D 0 1 2011 To: Report Covering the Period: From:

	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2011 Y Y Y		5260.00
(b) Cash on Hand at Begining of Reporting Period	5260.00	
(c) Total Receipts (from Line 19)	21750.00	21750.00
(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	27010.00	27010.00
7. T	otal Disbursements (from Line 31)	1000.00	1000.00
F	Cash on Hand at Close of Reporting Period Subtract Line 7 from Line 6(d))	26010.00	26010.00
tŀ	Debts and Obligations owed TO ne committee (Itemize all on Schedule C and/or Schedule D)	0.00	
tŀ	Debts and Obligations owed BY ne committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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) Page 3

Write or Type Committee Name

Medical Device Manufacturers Association PAC

Report Covering the Period:

м м О 1

From:

D D D 1

Y Y W Y 2 0 1 1

Γα:

м м

^D 3 0

Y Y Y Y 2 0 1 1

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	ontributions (other than loans) From:		
(a)			
	Than Political Committees (i) Itemized (use Schedule A)	21750.00	21750.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL (add	21750.00	21750.00
	Lines 11(a)(i) and (ii)	21750.00	21750.00
(b)	Political Party Committees	0.00	0.00
(c)	Other Political Committees	0.00	0.00
(d)	(such as PACs) Total Contributions (add Lines	0.00	0.00
(4)	11(a)(iii),(b) and (c)) (Carry	21750.00	21750.00
	Totals to Line 33, page 5)		
	ansfers From Affiliated/Other rty Committees	0.00	0.00
Га	rty committees		
B. All	Loans Received	0.00	0.00
1. Lo	an Repayments Received	0.00	0.00
5. Of	fsets To Operating Expenditures		
	efunds, Rebates, etc.) arry Totals to Line 37, page 5)	0.00	0.00
	funds of Contributions Made		
	Federal candidates and Other	0.00	0.00
	litical Committees	0.00	0.00
	her Federal Receipts ividends, Interest, etc.)	0.00	0.00
	ansfers from Non-Federal and Levin Funds Non-Federal Account		
(α)	(from Schedule H3)	0.00	0.00
4.		0.00	0.00
(b)	Levin Funds (from Schedule H5)		0.00
(c)	Total Transfer (add 18(a) and 18(b)).	0.00	0.00
. To	tal Receipts (add Lines 11(d),	01750.00	04750.00
12	, 13, 14, 15, 16, 17, and 18(c))	21750.00	21750.00
	al Federal Receipts	21750.00	01750.00
(su	btract Line 18(c) from Line 19)	21750.00	21750.00

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DETAILED SUMMARY PAGE

of Disbursements	Page 4	
COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
10141111101101104	- Calonida Four to Date	
0.00	0.00	
0.00	0.00	
0.00	0.00	
0.00	0.00	
0.00	0.00	
1000.00	1000.00	
0.00	0.00	
0.00	0.00	
0.00	0.00	
0.00	0.00	
0.00	0.00	
0.00	0.00	
0.00	0.00	
0.00	0.00	
0.00	0.00	
0.00	0.00	
0.00	0.00	
0.00	0.00	
0.00	0.00	
1000.00	1000.00	
1000.00	1000.00	
	COLUMN A Total This Period 0.00 0.00 0.00 0.00 1000.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	

DETAILED SUMMARY PAGE

of Disbursements

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	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)	21750.00	21750.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	21750.00	21750.00
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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 8 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	
NAME OF COMMITTEE (In Full) Medical Device Manufacturers Associa	ation PAC		
Full Name (Last, First, Middle Initial) Lynn D. Salo			Date of Receipt
Mailing Address 308 B Iris Ave.			02 16 2011
City	State	Zip Code	Transaction ID: 1788939
Corono Del Mar	CA	92625	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		5000.00
Name of Employer Allergan Medical	Occupatio VP Sales	n s & MArketing, Breast Aesthe	tic
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Joe E. Kiani			Date of Receipt
Mailing Address 1 Point Catalina			0 2 1 6 2 0 1 1
City	State	Zip Code	Transaction ID: 1788941
Laguna Niguel	CA	92677-9207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		5000.00
Name of Employer Masimo Corporation	Occupatio Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Paul Touhey, Jr.			Date of Receipt
Mailing Address 102 Laura Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 2212067
Royersford	PA	19468-1164	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2500.00
Name of Employer Fujirebio Diagnostics, In- c.	Occupatio Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2500.00	
SUBTOTAL of Receipts This Page (optional))	12500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/8 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Medical Device Manufacturers Asso	d Statements may not be sold or used by any perso the name and address of any political committee to ociation PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Richard Packer Mailing Address 9 Kendall Dr. City Westborough FEC ID number of contributing federal political committee. Name of Employer ZOLL Medical Corp. Receipt For: Primary General Other (specify)	State Zip Code MA 01581-3840 C Occupation CEO Aggregate Year-to-Date 5000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mark M. Sieczkarek Mailing Address 18588 Petunia Cou City Saratoga FEC ID number of contributing federal political committee. Name of Employer Conceptus, Inc. Receipt For: Primary General Other (specify)	State Zip Code CA 95070-5390 C Occupation President & CEO Aggregate Year-to-Date 4000.00	Date of Receipt M M Z 3 Z 0 1 1 Transaction ID: 5029706 Amount of Each Receipt this Period 4000.00
Full Name (Last, First, Middle Initial) Thomas C. Novelli Mailing Address 6486 Sutcliffe Dr. City Alexandria FEC ID number of contributing federal political committee. Name of Employer MDMA Receipt For: Primary General Other (specify)	State Zip Code VA 22315-5578 C Occupation Vice President Government Affairs Aggregate Year-to-Date 250.00	Date of Receipt M M / D D / Y Y Y Y Y O 6 177 2011 Transaction ID: 5029708 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional	l) >	9250.00

TOTAL This Period (last page this line number only)

_	011ED111 E D /EEO E						
	CHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 8/8		
ΙT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 28c 28c	25 26 29 30b		
	y Information copied from such Reports and State for commercial purposes, other than using the nar	•	, , ,				
$\overline{\ }$	NAME OF COMMITTEE (In Full)						
/	Medical Device Manufacturers Associatio	1 PAC					
	Full Name (Last, First, Middle Initial)			Transaction ID: 4570703			
	Friends Of Erik Paulsen	Date of Disbursement					
	Mailing Address P.O. Box 44369 250 Prairie Center Drive)	05 / 12 / 2011				
	City Eden Prairie	State Zip Code MN 55344		Amount of Each Disbursement			
	Purpose of Disbursement Direct Contribution	011	100	00.00			
	Candidate Name Rep. Erik Paulsen		Category/ Type				
	Office Sought: X House Senate President Disburs	ement For: 2012 Primary X General Other (specify)		Direct Contribution			
	State: MN District: 03						

SUBTOTAL of Disbursements This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	•	1000.00