

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED FEDERAL ELECTION COMMISSION

2010 OCT 12 P 2:34 Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines:

12FE4M5

Medical Device Manufacturers Association PAC (MDMA PAC)

ADDRESS (number and street)

P.O. Box 34591

(Check if address is changed)

Washington

DC

20043

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

slming@comerica.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

10 / 06 / 2010

3. FEC IDENTIFICATION NUMBER

C 00484162

4. IS THIS STATEMENT

(Check if NEW)

NEW (N)

OR

(Check if AMENDED)

AMENDED (A)

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

Type or Print Name of Treasurer Nancy Cushman

Signature of Treasurer

[Handwritten Signature]

Date

10 / 06 / 2010

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2009)

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5. TYPE OF COMMITTEE

Candidate Committee:

- (a)  This committee is a principal campaign committee. (Complete the candidate information below.)
- (b)  This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State   
 District

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

Party Committee:

- (d)  This committee is a  (National, State or subordinate) committee of the  (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
  - Corporation  Corporation w/o Capital Stock  Labor Organization
  - Membership Organization  Trade Association  Cooperative
  - In addition, this committee is a Lobbyist/Registrant PAC.
- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
  - In addition, this committee is a Lobbyist/Registrant PAC.
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number: <input type="checkbox"/> C _____
2.	_____	FEC ID number: <input type="checkbox"/> C _____
3.	_____	FEC ID number: <input type="checkbox"/> C _____
4.	_____	FEC ID number: <input type="checkbox"/> C _____

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Write or Type Committee Name

Medical Device Manufacturers Association PAC (MDMA PAC)

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Medical Device Manufacturers Association

Mailing Address

1350 I Street, NW

Suite 540

Washington

DC

20005

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Comerica Bank

Mailing Address

PAC Services

P.O. Box 75000, MC2250

Detroit

MI

48275

2250

Title or Position

CITY

STATE

ZIP CODE

Recordkeeper

Telephone number

248

371

7268

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Nancy Cushman

Mailing Address

P.O. Box 75000

MC2250

Detroit

MI

48275

2250

Title or Position

CITY

STATE

ZIP CODE

PAC Treasurer

Telephone number

248

371

5562

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Full Name of Designated Agent

Mark Leahy

Mailing Address

1350 I Street, NW

Suite 540

Washington

DC

20005

CITY

STATE

ZIP CODE

Title or Position

PAC Assistant Treasurer

Telephone number

202

354

7171

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Comerica Bank

Mailing Address

P.O. Box 75000

Detroit

MI

48275

2250

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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

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No Postmark

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Other (Specify): Date of Receipt or Postmarked

*[Signature]* *10/12/10*  
 PREPARER DATE PREPARED

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