

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

St Jude Medical Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="59687.10"/>	<input type="text" value="59687.10"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="59687.10"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="60918.74"/>	<input type="text" value="60918.74"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="120605.84"/>	<input type="text" value="120605.84"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11631.07"/>	<input type="text" value="11631.07"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="108974.77"/>	<input type="text" value="108974.77"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

St Jude Medical Political Action Committee

Report Covering the Period: From: 01 / 01 / 2012 To: 03 / 31 / 2012

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).....	47066.24	47066.24
(ii) Unitemized	13852.50	13852.50
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)..... ▶	60918.74	60918.74
(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)	60918.74	60918.74
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 Transfers (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))..... ▶	60918.74	60918.74
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)	60918.74	60918.74

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	131.07	131.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	131.07	131.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11500.00	11500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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)) ..	11631.07	11631.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11631.07	11631.07

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	60918.74	60918.74
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	60918.74	60918.74
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	131.07	131.07
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	131.07	131.07

**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 OF 24
<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. Joel Becker
Full Name (Last, First, Middle Initial)
Mailing Address 6201 Soter Parkway
City Austin State TX Zip Code 78735
FEC ID number of contributing federal political committee. **C**
Name of Employer St Jude Medical Occupation President USD
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 21 / 2012
Transaction ID : SA11AI.6009
Amount of Each Receipt this Period 2000.00
PayPal

B. Keith Boettiger
Full Name (Last, First, Middle Initial)
Mailing Address 4519 Rheims Place
City Dallas State TX Zip Code 75209
FEC ID number of contributing federal political committee. **C**
Name of Employer St Jude Medical Occupation Vp., Sales - NMD
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 16 / 2012
Transaction ID : SA11AI.5735
Amount of Each Receipt this Period 500.00
Payroll - one time deduction

C. Gene Bornzin
Full Name (Last, First, Middle Initial)
Mailing Address 608 Stonebrook Street
City Simi Valley State CA Zip Code 93065
FEC ID number of contributing federal political committee. **C**
Name of Employer St Jude Medical Occupation VP, Fellow Research CRMD
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 16 / 2012
Transaction ID : SA11AI.5730
Amount of Each Receipt this Period 1000.00
Payroll - One time deduction

SUBTOTAL of Receipts This Page (optional).....	3500.00
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 7 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
St Jude Medical Political Action Committee

Full Name (Last, First, Middle Initial) A. John W Brown			Date of Receipt 03 / 08 / 2012 Transaction ID : SA11AI.5714		
Mailing Address 750 Trade Centre			Amount of Each Receipt this Period 5000.00		
City Portage	State MI	Zip Code 49002			
FEC ID number of contributing federal political committee. C					
Name of Employer Stryker		Occupation Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00			

Full Name (Last, First, Middle Initial) B. Jeffrey J Chateau			Date of Receipt 03 / 07 / 2012 Transaction ID : SA11AI.6064		
Mailing Address 24376 Mira Vista Street			Amount of Each Receipt this Period 500.00		
City Valencia	State CA	Zip Code 91355			
FEC ID number of contributing federal political committee. C					
Name of Employer St Jude Medical-CRM		Occupation V.P. Supply Line			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			
			PayPal		

Full Name (Last, First, Middle Initial) C. Angela Craig			Date of Receipt 03 / 30 / 2012 Transaction ID : SA11AI.5746		
Mailing Address 1966 Princeton Ave.			Amount of Each Receipt this Period 230.00		
City St. Paul	State MN	Zip Code 55105			
FEC ID number of contributing federal political committee. C					
Name of Employer St Jude Meidical		Occupation VP, Corporate Relations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00			
			Payroll - Bi-weekly		

SUBTOTAL of Receipts This Page (optional).....▶	5730.00
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 8 OF 24
	<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	<input type="checkbox"/> 17

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

A. Ashli J Douglas
Full Name (Last, First, Middle Initial)
Mailing Address 615 25th Street S

City Arlington	State VA	Zip Code 22202
-------------------	-------------	-------------------

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

Name of Employer St Jude Medical	Occupation Sr. Dir., Gov. Affairs
-------------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2012

Transaction ID : SA11AI.6112

Amount of Each Receipt this Period
250.00

PayPal

B. Ashli J Douglas
Full Name (Last, First, Middle Initial)
Mailing Address 615 25th Street S

City Arlington	State VA	Zip Code 22202
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FEC ID number of contributing federal political committee. **C**

Name of Employer St Jude Medical	Occupation Sr. Dir., Gov. Affairs
-------------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : SA11AI.5755

Amount of Each Receipt this Period
380.00

Payroll - biweekly

C. Kimberley A Elting
Full Name (Last, First, Middle Initial)
Mailing Address 4611 Cherokee Trail

City Dallas	State TX	Zip Code 75209
----------------	-------------	-------------------

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

Name of Employer St Jude Medical	Occupation V.P. & General Counsel - ANS
-------------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2012

Transaction ID : SA11AI.5772

Amount of Each Receipt this Period
1500.00

Payroll - one time deduction

SUBTOTAL of Receipts This Page (optional).....▶	2130.00
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 OF 24
<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

Full Name (Last, First, Middle Initial) A. Stuart M Essig		Date of Receipt MM / DD / YYYY 03 / 19 / 2012 Transaction ID : SA11AI.5718
Mailing Address 26 Coniston Court		Amount of Each Receipt this Period 2500.00
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Intera Life Sciences	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Eric S Fain		Date of Receipt MM / DD / YYYY 03 / 19 / 2012 Transaction ID : SA11AI.5716
Mailing Address 10 Princeton Road		Amount of Each Receipt this Period 2000.00
City Menlo Park	State CA	Zip Code 94025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer St Jude Medical	Occupation President - CRMD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Thomas Garrett		Date of Receipt MM / DD / YYYY 03 / 08 / 2012 Transaction ID : SA11AI.5715
Mailing Address 540 Wentworth Ave. W		Amount of Each Receipt this Period 5000.00
City St Paul	State MN	Zip Code 55118
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Retired	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	9500.00
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 10 OF 24
	<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. Bobby George
Full Name (Last, First, Middle Initial)
Mailing Address 15522 57th Place N
City Plymouth State MN Zip Code 55446
FEC ID number of contributing federal political committee. **C**
Name of Employer St Jude Medical Occupation VP., Customer Service and EIT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 03 / 30 / 2012
Transaction ID : SA11AI.5940
Amount of Each Receipt this Period 250.00
Payroll one time deduction

B. Greg Gilmore
Full Name (Last, First, Middle Initial)
Mailing Address 1616 15th ST NW, Apt 300
City Washington State DC Zip Code 20009
FEC ID number of contributing federal political committee. **C**
Name of Employer St Jude Medical Occupation Mgr., Regional Sales EP
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 03 / 30 / 2012
Transaction ID : SA11AI.5970
Amount of Each Receipt this Period 300.00
Payroll one time deduction

C. Cynthia Gray
Full Name (Last, First, Middle Initial)
Mailing Address 22 Windsor Isle Drive
City Longwood State FL Zip Code 32779
FEC ID number of contributing federal political committee. **C**
Name of Employer St Jude Medical Occupation Dr., Regional Sales NMD
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 03 / 16 / 2012
Transaction ID : SA11AI.5781
Amount of Each Receipt this Period 250.00
Payroll - one time deduction

SUBTOTAL of Receipts This Page (optional)..... **800.00**
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 11 OF 24
<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. Werner Hafelfinger
Full Name (Last, First, Middle Initial)

Mailing Address 5508 Via Mira Flores

City Thousand Oaks State CA Zip Code 91320

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

Name of Employer St Jude Medical CRMD Occupation VP. Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 16 / 2012

Transaction ID : SA11AI.5783

Amount of Each Receipt this Period
300.00

Payroll - one time deduction

B. Peter Hegi
Full Name (Last, First, Middle Initial)

Mailing Address 4251 Potomac Ave

City Dallas State TX Zip Code 75205

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

Name of Employer St Jude Medical Occupation VP Marketing NMD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : SA11AI.5788

Amount of Each Receipt this Period
250.00

Payroll One time deduction

C. Reed Heimbecher
Full Name (Last, First, Middle Initial)

Mailing Address PO. Box 33

City Hamel State MN Zip Code 55340

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

Name of Employer St Jude Medical Occupation Vp., Intellectual Property AF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 16 / 2012

Transaction ID : SA11AI.5793

Amount of Each Receipt this Period
300.00

Payroll one time deduction

SUBTOTAL of Receipts This Page (optional).....▶	850.00
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: PAGE 12 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. John C Heinmiller
 Full Name (Last, First, Middle Initial)
 Mailing Address 7317 Auto Club Road
 City State Zip Code
 Bloomington MN 55538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 St Jude Medical Executive VP and CFO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2012
Transaction ID : SA11AI.5720
 Amount of Each Receipt this Period
 3000.00

B. Barbara B Hill
 Full Name (Last, First, Middle Initial)
 Mailing Address 212 Lambeth Road
 City State Zip Code
 Baltimore MD 21218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Valveoptions, Inc. CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2012
Transaction ID : SA11AI.5717
 Amount of Each Receipt this Period
 3500.00

C. Mark Hoffman
 Full Name (Last, First, Middle Initial)
 Mailing Address 28234 N Infinity Circle
 City State Zip Code
 Santa Clarita CA 91390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 St Jude Medical Sr. VP - Human Resources - CRMD
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2012
Transaction ID : SA11AI.6080
 Amount of Each Receipt this Period
 500.00
 PayPal

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00
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: PAGE 13 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Bill Little
 Mailing Address 635 Brockton Lane N
 City State Zip Code
 Plymouth MN 55447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 St Jude Medical VP., Marketing
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012
Transaction ID : SA11AI.6094
 Amount of Each Receipt this Period
 1000.00
 PayPal

Full Name (Last, First, Middle Initial)
B. Jonathan Losk
 Mailing Address 14415 Greenleaf Street
 City State Zip Code
 Sherman Oaks CA 91423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 St Jude Medical VP., Hardware Development
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2012
Transaction ID : SA11AI.6099
 Amount of Each Receipt this Period
 300.00
 PayPal

Full Name (Last, First, Middle Initial)
c. Alan L Lybeck
 Mailing Address 5006 29th Ave S
 City State Zip Code
 Minneapolis MN 55417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 St Jude Medical Records Mgr. - Corporate
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2012
Transaction ID : SA11AI.6069
 Amount of Each Receipt this Period
 250.00
 PayPal

SUBTOTAL of Receipts This Page (optional)..... ▶ 1550.00
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: PAGE 14 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Jeffrey Moulton

Mailing Address 27 Niblick Lane

City State Zip Code
 Greenland NH 03840

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

Name of Employer Occupation
 St Jude Medical Territory Mgr. CRM & AF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 03 / 08 / 2012
Transaction ID : SA11AI.6054

Amount of Each Receipt this Period
 250.00

PayPal

Full Name (Last, First, Middle Initial)
B. Mark Murphy

Mailing Address 3743 Mount Vernon Lane

City State Zip Code
 Woodbury MN 55129

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

Name of Employer Occupation
 St Jude Medical Sr. Dir. SAP Global Competency Center

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 03 / 02 / 2012
Transaction ID : SA11AI.5833

Amount of Each Receipt this Period
 225.00

Payroll one time deduction

Full Name (Last, First, Middle Initial)
C. Tom Northenscold

Mailing Address 1215 Oakview Lane N

City State Zip Code
 Plymouth MN 55441

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

Name of Employer Occupation
 St Jude Medical VP., IT & CIO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 288.00

Date of Receipt
 03 / 30 / 2012
Transaction ID : SA11AI.5837

Amount of Each Receipt this Period
 288.00

Payroll bi-weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 763.00

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 15 OF 24
	<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. John Poore
 Full Name (Last, First, Middle Initial)
 Mailing Address 1964 La France Ave.
 City South Pasadena State CA Zip Code 91030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St Jude Medical Occupation Scientist, CRMD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 16 / 2012
Transaction ID : SA11AI.5985
 Amount of Each Receipt this Period 300.00
 Payroll one time deduction

B. James W Reynolds
 Full Name (Last, First, Middle Initial)
 Mailing Address 16301 Sundancer Lane
 City Huntington Beach State CA Zip Code 92649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St Jude Medical Occupation Manager - CRMD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 21 / 2012
Transaction ID : SA11AI.6003
 Amount of Each Receipt this Period 1000.00
 PayPal

C. Bradley Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 1553 Sherman Lake Ct.
 City Lino Lakes State MN Zip Code 55038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St Jude Medical - Cardiovas. Occupation Director Sr., Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 02 / 2012
Transaction ID : SA11AI.5850
 Amount of Each Receipt this Period 500.00
 Payroll one time deduction

SUBTOTAL of Receipts This Page (optional).....▶	1800.00
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: PAGE 16 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Michael A Rocca

Mailing Address 28930 Sommers Dr

City Naples State FL Zip Code 34119

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

Name of Employer Retired Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 03 / 19 / 2012
Transaction ID : SA11AI.5719

Amount of Each Receipt this Period
 2000.00

Full Name (Last, First, Middle Initial)
B. Clint Schneider

Mailing Address 3020 Jewel St

City Plymouth State MN Zip Code 55447

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

Name of Employer SJM Occupation VP Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 03 / 20 / 2012
Transaction ID : SA11AI.6026

Amount of Each Receipt this Period
 400.00

PayPal

Full Name (Last, First, Middle Initial)
C. Tami Shipman

Mailing Address 1314 Ashwood Court

City San Mateo State CA Zip Code 94402

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

Name of Employer St Jude Medical - CRMD Occupation Dir., Clinical Studies

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 03 / 12 / 2012
Transaction ID : SA11AI.6043

Amount of Each Receipt this Period
 250.00

PayPal

SUBTOTAL of Receipts This Page (optional)..... ▶ 2650.00

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 17 OF 24
	<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. Scott Simcoe
Full Name (Last, First, Middle Initial)

Mailing Address 101 W Alexa Ct

City Bozeman State MT Zip Code 59718

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

Name of Employer St Jude Medical CRM Occupation Engineer, Prin Software

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2012
Transaction ID : SA11AI.5861

Amount of Each Receipt this Period
 250.00

Payroll one time deduction

B. Jeff Snell
Full Name (Last, First, Middle Initial)

Mailing Address 9838 Nevada Ave

City Chatsworth State CA Zip Code 91311

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

Name of Employer St Jude Medical Occupation Scientist, CRMD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2012
Transaction ID : SA11AI.6065

Amount of Each Receipt this Period
 500.00

PayPal

C. Jane J Song
Full Name (Last, First, Middle Initial)

Mailing Address 700 S 2nd Street #22

City Minneapolis State MN Zip Code 55401

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

Name of Employer St Jude Medical Occupation President - AFD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2012
Transaction ID : SA11AI.5712

Amount of Each Receipt this Period
 2000.00

SUBTOTAL of Receipts This Page (optional).....▶	2750.00
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: PAGE 18 OF 24
(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. Daniel J Starks
Full Name (Last, First, Middle Initial)
Mailing Address One Lillehei Plaza
City St Paul State MN Zip Code 55117
FEC ID number of contributing federal political committee. **C**
Name of Employer St Jude Medical Occupation CEO/President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 28 / 2012
Transaction ID : SA11AI.6114
Amount of Each Receipt this Period 5000.00
PayPal

B. Gary Stewart
Full Name (Last, First, Middle Initial)
Mailing Address 9446 E Ave. T12
City Littlerock State CA Zip Code 93543
FEC ID number of contributing federal political committee. **C**
Name of Employer St Jude Medical Occupation Manager, Documentation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 21 / 2012
Transaction ID : SA11AI.6101
Amount of Each Receipt this Period 250.00
PayPal

C. Gary Thompson
Full Name (Last, First, Middle Initial)
Mailing Address 109 Summerwalk Place
City Simpsonville State SC Zip Code 29681
FEC ID number of contributing federal political committee. **C**
Name of Employer St Jude Medical Occupation Dir., SBU Operations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 16 / 2012
Transaction ID : SA11AI.5870
Amount of Each Receipt this Period 250.00
Payroll one time deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
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 19 OF 24
<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. Steve Tight
Full Name (Last, First, Middle Initial)
Mailing Address 4316 Wooddale Ave
City St Louis Park State MN Zip Code 55424
FEC ID number of contributing federal political committee. **C**
Name of Employer St Jude Medical Occupation VP & General Counsel
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **293.24**

Date of Receipt **03 / 19 / 2012**
Transaction ID : SA11AI.6038
Amount of Each Receipt this Period **293.24**
PayPal

B. Duane Van Fleet
Full Name (Last, First, Middle Initial)
Mailing Address 820 Northway Road
City Williamsport State PA Zip Code 17701
FEC ID number of contributing federal political committee. **C**
Name of Employer St Jude Medical Occupation Dir., Regional Sales, USD
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 02 / 2012**
Transaction ID : SA11AI.5879
Amount of Each Receipt this Period **1000.00**
Payroll one time deduction

C. Wendy L Yarno
Full Name (Last, First, Middle Initial)
Mailing Address 8 Hay Barrick Road
City Whitehorse Station State NJ Zip Code 08889
FEC ID number of contributing federal political committee. **C**
Name of Employer Merck & Co. Occupation Chief Marketing Officer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 19 / 2012**
Transaction ID : SA11AI.5721
Amount of Each Receipt this Period **1000.00**

SUBTOTAL of Receipts This Page (optional)..... **2293.24**
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 20 OF 24
(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)
John Zhang

Mailing Address 20 Foxcrest

City Irvine State CA Zip Code 92620

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

Name of Employer St Jude Medical Occupation Principal Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2012

Transaction ID : SA11AI.5711

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	47066.24

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Allyson Schwartz for Congress

Mailing Address 303 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Fundraiser

011

Candidate Name

Allyson Schwartz

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: PA District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2012

Transaction ID : SB23.5688

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Bennet for Colorado

Mailing Address 426 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Fundraiser

011

Candidate Name

Michael Bennet

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	22	/	2012

Transaction ID : SB23.5701

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. DAVE CAMP FOR CONGRESS

Mailing Address 2501 Wisconsin Ave NW
#304

City Washington State DC Zip Code 20007

Purpose of Disbursement
Fundraiser

011

Candidate Name

Dave Camp

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MI District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2012

Transaction ID : SB23.5686

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

4000.00

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Diana DeGette for Congress

Mailing Address 228 2nd Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraiser

011

Candidate Name

Diana DeGette

Category/
Type

Office Sought: House
 Senate
 President
State: CO District: 01

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 22 / 2012

Transaction ID : **SB23.5696**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Diane Black for Congress

Mailing Address P.O. Box 1437

City Gallatin State TN Zip Code 37066

Purpose of Disbursement
Fundraiser

011

Candidate Name

Diane Black

Category/
Type

Office Sought: House
 Senate
 President
State: TN District: 06

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 22 / 2012

Transaction ID : **SB23.5692**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF ERIK PAULSEN

Mailing Address P.O. Box 44369
250 Prairie Center Drive

City Eden Prairie State MN Zip Code 55344

Purpose of Disbursement
Fundraiser

011

Candidate Name

Erik Paulsen

Category/
Type

Office Sought: House
 Senate
 President
State: MN District: 03

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2012

Transaction ID : **SB23.5685**

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Friends of Joe Pitts

Mailing Address 1707 Prince St #5

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Fundraiser

011

Candidate Name

Joe Pitts

Category/
Type

Office Sought: House
 Senate
 President
State: PA District: 16

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2012

Transaction ID : SB23.5700

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Jeff Duncan for Congress

Mailing Address 499 S Capital Street SW, Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraiser

011

Candidate Name

Jeff Duncan

Category/
Type

Office Sought: House
 Senate
 President
State: SC District: 03

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 16 / 2012

Transaction ID : SB23.5683

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Jeff Duncan for Congress

Mailing Address 499 S Capital Street SW, Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraiser

011

Candidate Name

Jeff Duncan

Category/
Type

Office Sought: House
 Senate
 President
State: SC District: 03

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 01 / 2012

Transaction ID : SB23.5687

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

3500.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. VOLUNTEERS FOR SHIMKUS

Mailing Address P.O. BOX 661
PO BOX 5458

City COLLINSVILLE State IL Zip Code 62234

Purpose of Disbursement
Fundraiser

Candidate Name
John Shimkus

Office Sought: House
 Senate
 President
State: OH District: 19

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2012

Transaction ID : SB23.5691

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1000.00

11500.00
