

RECEIVED

2010 OCT 20 AM 10:16

FEC MAIL CENTER

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT 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 different than previously reported. (ACC) Washington DC 20043

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 0 0 4 8 4 1 6 2

3. IS THIS REPORT NEW OR AMENDED (X) (N) (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 07 / 01 / 2010 through 09 / 30 / 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 Nancy Cushman

Signature of Treasurer [Handwritten Signature] 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.

10030462900

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Medical Device Manufacturers Association PAC (MDMA PAC)

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="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>	<input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="3"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>
(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="3"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="3"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3"/> <input type="text" value="9"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="3"/> <input type="text" value="9"/> <input type="text" value="0"/> <input type="text" value="0"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2"/> <input type="text" value="6"/> <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="2"/> <input type="text" value="6"/> <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>	



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

10030462901

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	3900	3900
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	3900	3900
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		

10030462903

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)	0 0 0	3 0 0 0 0
34. Total Contribution Refunds (from Line 28(d))	0 0 0	0 0 0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0 0 0	3 0 0 0 0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3 9 0 0	3 9 0 0
37. Offsets to Operating Expenditures (from Line 15, page 3)	0 0 0	0 0 0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3 9 0 0	3 9 0 0

10030462904

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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)

Medical Device Manufacturers Association PAC (MDMA PAC)

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
07	30	2010

A.
Bank of America

Mailing Address

1501 Pennsylvania Ave., NW

City

State

Zip Code

Washington

DC

20005

Purpose of Disbursement

bank service charge

Candidate Name

Category/Type

Amount of Each Disbursement this Period

Amount
1300

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Date of Disbursement

MM	DD	YYYY
08	31	2010

B.
Bank of America

Mailing Address

1501 Pennsylvania Ave., NW

City

State

Zip Code

Washington

DC

20005

Purpose of Disbursement

bank service charge

Candidate Name

Category/Type

Amount of Each Disbursement this Period

Amount
1300

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Date of Disbursement

MM	DD	YYYY
09	30	2010

C.
Bank of America

Mailing Address

1501 Pennsylvania Ave., NW

City

State

Zip Code

Washington

DC

20005

Purpose of Disbursement

bank service charge

Candidate Name

Category/Type

Amount of Each Disbursement this Period

Amount
1300

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

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

3900

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

3900

10030462905

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

10030462906

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed Ex</i>	Shipping Date <i>10/19/10</i>
Next Business Day Delivery <input checked="" type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

ER *10/20/10*
 PREPARER DATE PREPARED