

**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)

BOSTON SCIENTIFIC CORPORATION POLITICAL ACTION COMMITTEE (BSC PAC)

Full Name (Last, First, Middle Initial)

A. Advanced Medical Technology Association

Mailing Address 1200 G STREET NW - SUITE 400

City Washington State DC Zip Code 20005-3832

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) Other2015

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2015

Transaction ID : BE84EE703D818447FBBC

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Becerra For Congress

Mailing Address P.O. Box 261060

City Los Angeles State CA Zip Code 90026

Purpose of Disbursement Contribution

Candidate Name

Rep. Xavier Becerra

Office Sought: House Senate President
State: CA District: 31

Disbursement For: 2016
 Primary General
 Other (specify)

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2015

Transaction ID : B6B686E854A8A48D9B5B

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. BENISHEK FOR CONGRESS, INC.

Mailing Address PO BOX 108

City GLADSTONE State MI Zip Code 49837

Purpose of Disbursement Contribution

Candidate Name

Rep. Daniel J Benishek MD

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

Disbursement For: 2016
 Primary General
 Other (specify)

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2015

Transaction ID : B8DCCEDD350734364973

Amount of Each Disbursement this Period

2500.00

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

7500.00

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