

**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)
Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Friends of Schumer

Mailing Address 192 Lexington Ave. Suite 1001

City New York State NY Zip Code 10016

Purpose of Disbursement
Contribution

011

Candidate Name

Charles E Schumer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 11 / 2015

Transaction ID : B575544

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Tiberi for Congress

Mailing Address 2931 E. Dublin Granville Rd. #190

City Columbus State OH Zip Code 43231

Purpose of Disbursement
Contribution

011

Candidate Name

Pat Tiberi

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 12

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : B545217

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. The Freedom Project

Mailing Address 320 1st Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2015

Transaction ID : B546628

Amount of Each Disbursement this Period

2500.00

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

6500.00

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