

**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

Medtronic Inc. PAC

ADDRESS (number and street) ▼

950 F Street NW Suite 500

☐ Check if different than previously reported. (ACC)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00311878

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☒ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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 Gary Ellis

Signature of Treasurer

Gary Ellis

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Medtronic Inc. PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
01		01		2013

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2013</div></div>		<div><div></div><div>34493.67</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>34493.67</div></div>	
(c) Total Receipts (from Line 19) .....	<div><div></div><div>100672.16</div></div>	<div><div></div><div>100672.16</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>135165.83</div></div>	<div><div></div><div>135165.83</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>104113.82</div></div>	<div><div></div><div>104113.82</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div><div></div><div>31052.01</div></div>	<div><div></div><div>31052.01</div></div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	



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)

Page 3

Write or Type Committee Name

**Medtronic Inc. PAC**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
01		01		2013

To:

M M	/	D D	/	Y Y Y Y Y Y
06		30		2013

**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).....

60717.45

60717.45

(ii) Unitemized .....

39954.71

39954.71

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

100672.16

100672.16

(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) ..... ▶

100672.16

100672.16

## 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)) ..... ▶

100672.16

100672.16

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

100672.16

100672.16

**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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	14613.76	14613.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	14613.76	14613.76
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	89500.00	89500.00
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 .....	0.06	0.06
(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)).....	0.06	0.06
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)) ..	104113.82	104113.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	104113.82	104113.82

**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) .....	100672.16	100672.16
34. Total Contribution Refunds (from Line 28(d)) .....	0.06	0.06
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	100672.10	100672.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	14613.76	14613.76
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	14613.76	14613.76

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: F3XN

Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule:

Transaction ID:

# **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 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Ross A Allen**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.10

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541626**

Amount of Each Receipt this Period

41.62

Full Name (Last, First, Middle Initial)

**B. Mr. Ross A Allen**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.72

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538607**

Amount of Each Receipt this Period

41.62

Full Name (Last, First, Middle Initial)

**C. Mr. Ross A Allen**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.34

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538935**

Amount of Each Receipt this Period

41.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

124.86

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Ross A Allen**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.96

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 12 / 2013

**Transaction ID : A2013-2721451**

Amount of Each Receipt this Period

41.62

Full Name (Last, First, Middle Initial)

**B. Mr. Ross A Allen**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.58

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 26 / 2013

**Transaction ID : A2013-2721780**

Amount of Each Receipt this Period

41.62

Full Name (Last, First, Middle Initial)

**C. Mr. Ross A Allen**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.20

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 10 / 2013

**Transaction ID : A2013-3224496**

Amount of Each Receipt this Period

41.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

124.86

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



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Ross A Allen**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.82

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

**Transaction ID : A2013-3224165**

Amount of Each Receipt this Period

41.62

Full Name (Last, First, Middle Initial)

**B. Mr. Ross A Allen**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.44

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 07 / 2013

**Transaction ID : A2013-3224823**

Amount of Each Receipt this Period

41.62

Full Name (Last, First, Middle Initial)

**C. Mr. Ross A Allen**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.06

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 21 / 2013

**Transaction ID : A2013-3290097**

Amount of Each Receipt this Period

41.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

124.86

**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 10 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Mr. Thomas L Armitage

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regulatory/Clinical CV

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

211.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2013

Transaction ID : A2013-3224430

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. Mr. Thomas L Armitage

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regulatory/Clinical CV

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 07 / 2013

Transaction ID : A2013-3225086

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. Mr. Thomas L Armitage

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regulatory/Clinical CV

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 21 / 2013

Transaction ID : A2013-3290362

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)..... ►

57.69

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 11 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

**A. Mr. Neil P Ayotte**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Deputy General Counsel CVG

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 18 / 2013

Transaction ID : A2013-14489

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Mr. Neil P Ayotte**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Deputy General Counsel CVG

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 01 / 2013

Transaction ID : A2013-266813

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Mr. Neil P Ayotte**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Deputy General Counsel CVG

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2013

Transaction ID : A2013-267145

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

375.00

# **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 12 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Neil P Ayotte**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Deputy General Counsel CVG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2013

**Transaction ID : A2013-541729**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Neil P Ayotte**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Deputy General Counsel CVG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2013

**Transaction ID : A2013-538710**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Neil P Ayotte**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Deputy General Counsel CVG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2013

**Transaction ID : A2013-539038**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

375.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

**A. Mr. Neil P Ayotte**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Deputy General Counsel CVG

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 12 / 2013

Transaction ID : A2013-2721555

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Mr. Neil P Ayotte**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Deputy General Counsel CVG

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 26 / 2013

Transaction ID : A2013-2721884

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Mr. Neil P Ayotte**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Deputy General Counsel CVG

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 10 / 2013

Transaction ID : A2013-3224600

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

375.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Neil P Ayotte**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Deputy General Counsel CVG

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224269**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Neil P Ayotte**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Deputy General Counsel CVG

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224927**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Neil P Ayotte**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Deputy General Counsel CVG

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1625.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290201**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

375.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

**A. Ms. Jessica E Battaglia**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2013

Transaction ID : A2013-538785

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Ms. Jessica E Battaglia**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2013

Transaction ID : A2013-539113

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Ms. Jessica E Battaglia**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 12 / 2013

Transaction ID : A2013-2721630

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

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 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

**A. Ms. Jessica E Battaglia**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 26 / 2013

Transaction ID : A2013-2721959

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Ms. Jessica E Battaglia**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 10 / 2013

Transaction ID : A2013-3224675

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Ms. Jessica E Battaglia**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

Transaction ID : A2013-3224344

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

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



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

PAGE 17 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Jessica E Battaglia**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225002**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Ms. Jessica E Battaglia**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290276**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Dale F Beumer**

Mailing Address 8200 Coral Sea St NE

City Mounds View State MN Zip Code 55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Cardiology Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

02 / 01 / 2013

**Transaction ID : A2013-266982**

Amount of Each Receipt this Period

76.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

156.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Dale F Beumer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Cardiology Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2013

**Transaction ID : A2013-267312**

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

## **B. Dale F Beumer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Cardiology Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

MM / DD / YYYY  
03 / 01 / 2013

**Transaction ID : A2013-541897**

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

## **C. Dale F Beumer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Cardiology Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

MM / DD / YYYY  
03 / 15 / 2013

**Transaction ID : A2013-538875**

Amount of Each Receipt this Period

76.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

228.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(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)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

**A. Dale F Beumer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Cardiology Group

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

532.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2013

Transaction ID : A2013-539206

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

**B. Dale F Beumer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Cardiology Group

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2013

Transaction ID : A2013-2721719

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

**C. Dale F Beumer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Cardiology Group

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

684.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2013

Transaction ID : A2013-2722050

Amount of Each Receipt this Period

76.00

SUBTOTAL of Receipts This Page (optional)..... ►

228.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Dale F Beumer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Cardiology Group

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

760.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224764**

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

## **B. Dale F Beumer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Cardiology Group

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

836.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224436**

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

## **C. Dale F Beumer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Cardiology Group

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

912.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225092**

Amount of Each Receipt this Period

76.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

228.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 21 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Dale F Beumer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Cardiology Group

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

988.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290368**

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Michael Bolen**

Mailing Address 710 Medtronic Parkway NE

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Strategist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538890**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Michael Bolen**

Mailing Address 710 Medtronic Parkway NE

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Strategist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539221**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

156.00

# **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 22 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael Bolen**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721734**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael Bolen**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2722065**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael Bolen**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224779**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 23 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael Bolen**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224451**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael Bolen**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225107**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael Bolen**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290383**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 24 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Mr. Jason D Brown

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Corporate Sales Dir MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 26 / 2013

Transaction ID : A2013-2721984

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Mr. Jason D Brown

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Corporate Sales Dir MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 10 / 2013

Transaction ID : A2013-3224700

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Mr. Jason D Brown

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Corporate Sales Dir MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 24 / 2013

Transaction ID : A2013-3224370

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

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



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 OF 250

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Jason D Brown**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Corporate Sales Dir MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225028**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mr. Jason D Brown**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Corporate Sales Dir MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290302**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. Kevin M Callahan**

Mailing Address 8200 Coral Sea St NE

City State Zip Code  
 Mounds View MN 55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Clinical Research Mgr USA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.53

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224193**

Amount of Each Receipt this Period

19.23

**SUBTOTAL** of Receipts This Page (optional)..... ►

69.23

**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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Kevin M Callahan**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Clinical Research Mgr USA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224851**

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

**B. Mr. Kevin M Callahan**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Clinical Research Mgr USA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290125**

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

**C. Ms. Mary Centoni**

Mailing Address 3540 Unocal Pl

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Tax Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721747**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

63.46

**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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

**A. Ms. Mary Centoni**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Tax Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 10 / 2013

Transaction ID : A2013-3224464

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Ms. Mary Centoni**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Tax Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

Transaction ID : A2013-3224133

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Ms. Mary Centoni**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Tax Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 07 / 2013

Transaction ID : A2013-3224791

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

**A. Ms. Mary Centoni**

Mailing Address 3540 Unocal Pl

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Tax Director

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 06 / 21 / 2013

Transaction ID : A2013-3290065

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Ms. Alexandra T Clyde**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Gbl HealthPol-Reimb-HCEcon

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 05 / 24 / 2013

Transaction ID : A2013-3224364

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Ms. Alexandra T Clyde**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Gbl HealthPol-Reimb-HCEcon

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 06 / 07 / 2013

Transaction ID : A2013-3225022

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

65.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Alexandra T Clyde**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Gbl HealthPol-Reimb-HCEcon

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 06 / 21 / 2013
**Transaction ID : A2013-3290296**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael J Coyle**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

EVP Cardiac and Vascular Grp

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 06 / 19 / 2013
**Transaction ID : A2013-3227467**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Mr. Charles L Dennis II**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Open Innovation - IP

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 01 / 18 / 2013
**Transaction ID : A2013-14367**

Amount of Each Receipt this Period

107.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

5127.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Charles L Dennis II**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Open Innovation - IP

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

321.00

Date of Receipt

02 / 01 / 2013

**Transaction ID : A2013-266691**

Amount of Each Receipt this Period

107.00

Full Name (Last, First, Middle Initial)

**B. Mr. Charles L Dennis II**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Open Innovation - IP

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

428.00

Date of Receipt

02 / 15 / 2013

**Transaction ID : A2013-267023**

Amount of Each Receipt this Period

107.00

Full Name (Last, First, Middle Initial)

**C. Mr. Charles L Dennis II**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Open Innovation - IP

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

535.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541607**

Amount of Each Receipt this Period

107.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

321.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Charles L Dennis II**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Open Innovation - IP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

642.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538588**

Amount of Each Receipt this Period

107.00

Full Name (Last, First, Middle Initial)

**B. Mr. Charles L Dennis II**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Open Innovation - IP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538916**

Amount of Each Receipt this Period

107.00

Full Name (Last, First, Middle Initial)

**C. Mr. Charles L Dennis II**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Open Innovation - IP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721432**

Amount of Each Receipt this Period

107.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

321.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Mr. Charles L Dennis II

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Open Innovation - IP

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

963.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2013

Transaction ID : A2013-2721761

Amount of Each Receipt this Period

107.00

Full Name (Last, First, Middle Initial)

B. Mr. Charles L Dennis II

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Open Innovation - IP

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1070.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 10 / 2013

Transaction ID : A2013-3224477

Amount of Each Receipt this Period

107.00

Full Name (Last, First, Middle Initial)

C. Mr. Charles L Dennis II

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Open Innovation - IP

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1177.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2013

Transaction ID : A2013-3224146

Amount of Each Receipt this Period

107.00

SUBTOTAL of Receipts This Page (optional)..... ►

321.00

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



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Charles L Dennis II**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Open Innovation - IP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1284.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224804**

Amount of Each Receipt this Period

107.00

Full Name (Last, First, Middle Initial)

**B. Mr. Charles L Dennis II**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Open Innovation - IP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1391.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290078**

Amount of Each Receipt this Period

107.00

Full Name (Last, First, Middle Initial)

**C. Ms. Kathleen E Digiorno**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Legal Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538803**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

254.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 34 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Kathleen E Digiorno**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Legal Dir

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539131**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Ms. Kathleen E Digiorno**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Legal Dir

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721647**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Ms. Kathleen E Digiorno**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Legal Dir

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721976**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

120.00

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Kathleen E Digiorno**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Legal Dir

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224692**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Ms. Kathleen E Digiorno**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Legal Dir

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

440.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224362**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Ms. Kathleen E Digiorno**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Legal Dir

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225020**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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(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)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Ms. Kathleen E Digiorno

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Legal Dir

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2013

Transaction ID : A2013-3290294

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Mr. Ralph D Dorr

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Training/Ed Specialist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2013

Transaction ID : A2013-2722056

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

c. Mr. Ralph D Dorr

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Training/Ed Specialist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2013

Transaction ID : A2013-3224770

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

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  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Ralph D Dorr**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Training/Ed Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224442**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mr. Ralph D Dorr**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Training/Ed Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225098**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**c. Mr. Ralph D Dorr**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Training/Ed Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290374**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Deborah M Elder**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sales Representative II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541909**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Ms. Deborah M Elder**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sales Representative II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538887**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Ms. Deborah M Elder**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sales Representative II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539218**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Deborah M Elder**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sales Representative II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721731**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Ms. Deborah M Elder**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sales Representative II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2722062**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Ms. Deborah M Elder**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sales Representative II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224776**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Deborah M Elder**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sales Representative II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224448**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Ms. Deborah M Elder**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sales Representative II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225104**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Ms. Deborah M Elder**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sales Representative II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290380**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

150.00

**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

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(check only one)

PAGE 41 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Gary L Ellis**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

01 / 18 / 2013

**Transaction ID : A2013-14388**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. Gary L Ellis**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

02 / 01 / 2013

**Transaction ID : A2013-266712**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Mr. Gary L Ellis**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

02 / 15 / 2013

**Transaction ID : A2013-267044**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00

# **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 42 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Gary L Ellis**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541628**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. Gary L Ellis**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538609**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Mr. Gary L Ellis**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1344.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538937**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Mr. Gary L Ellis

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and Chief Financial Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1536.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 12 / 2013

Transaction ID : A2013-2721453

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

B. Mr. Gary L Ellis

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and Chief Financial Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1728.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 26 / 2013

Transaction ID : A2013-2721782

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

c. Mr. Gary L Ellis

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and Chief Financial Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 10 / 2013

Transaction ID : A2013-3224498

Amount of Each Receipt this Period

192.00

SUBTOTAL of Receipts This Page (optional)..... ►

576.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Gary L Ellis**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2112.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224167**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. Gary L Ellis**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224825**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Mr. Gary L Ellis**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290099**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Thomas B Emms**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Regional Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721915**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mr. Thomas B Emms**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Regional Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224631**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. Thomas B Emms**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Regional Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224300**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

**A. Mr. Thomas B Emms**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Regional Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 07 / 2013

Transaction ID : A2013-3224958

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mr. Thomas B Emms**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Regional Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 21 / 2013

Transaction ID : A2013-3290232

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**c. Mr. Gregory Englehardt**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 26 / 2013

Transaction ID : A2013-2722063

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Gregory Englehardt**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224777**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mr. Gregory Englehardt**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224449**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. Gregory Englehardt**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225105**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Gregory Englehardt**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 21 / 2013

**Transaction ID : A2013-3290381**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mr. Kenneth W Fairchild**

Mailing Address 710 Medtronic Pkwy

City State Zip Code  
Minneapolis MN 55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Rewards

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 01 / 2013

**Transaction ID : A2013-266685**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Mr. Kenneth W Fairchild**

Mailing Address 710 Medtronic Pkwy

City State Zip Code  
Minneapolis MN 55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Rewards

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2013

**Transaction ID : A2013-267017**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

225.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Mr. Kenneth W Fairchild

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Rewards

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2013

Transaction ID : A2013-541601

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mr. Kenneth W Fairchild

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Rewards

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2013

Transaction ID : A2013-538582

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Mr. Kenneth W Fairchild

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Rewards

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2013

Transaction ID : A2013-538910

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Kenneth W Fairchild**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Rewards

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721426**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Mr. Kenneth W Fairchild**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Rewards

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721755**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Mr. Kenneth W Fairchild**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Rewards

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224472**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Kenneth W Fairchild**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Rewards

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224141**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Mr. Kenneth W Fairchild**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Rewards

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224799**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Mr. Kenneth W Fairchild**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Rewards

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290073**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(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			

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)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

**A. Mr. Jeffrey A Farkas**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP US Federal Reimbursement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 01 / 2013

Transaction ID : A2013-266680

Amount of Each Receipt this Period

77.00

Full Name (Last, First, Middle Initial)

**B. Mr. Jeffrey A Farkas**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP US Federal Reimbursement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2013

Transaction ID : A2013-267012

Amount of Each Receipt this Period

77.00

Full Name (Last, First, Middle Initial)

**C. Mr. Jeffrey A Farkas**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP US Federal Reimbursement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2013

Transaction ID : A2013-541596

Amount of Each Receipt this Period

77.00

SUBTOTAL of Receipts This Page (optional)..... ►

231.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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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)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Jeffrey A Farkas**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP US Federal Reimbursement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538577**

Amount of Each Receipt this Period

77.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Jeffrey A Farkas**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP US Federal Reimbursement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538905**

Amount of Each Receipt this Period

77.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Jeffrey A Farkas**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP US Federal Reimbursement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

616.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721421**

Amount of Each Receipt this Period

77.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

231.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Jeffrey A Farkas**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP US Federal Reimbursement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

693.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721750**

Amount of Each Receipt this Period

77.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Jeffrey A Farkas**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP US Federal Reimbursement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224467**

Amount of Each Receipt this Period

77.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Jeffrey A Farkas**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP US Federal Reimbursement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224136**

Amount of Each Receipt this Period

77.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

231.00

# **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 55 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Jeffrey A Farkas**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP US Federal Reimbursement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224794**

Amount of Each Receipt this Period

77.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Jeffrey A Farkas**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP US Federal Reimbursement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290068**

Amount of Each Receipt this Period

77.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Donald C Findlay**

Mailing Address 710 Medtronic Pkwy

City Minneapolis State MN Zip Code 55432-5603

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP General Counsel/Corp Sec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

01 / 18 / 2013

**Transaction ID : A2013-14626**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

346.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 56 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Mr. Donald C Findlay

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP General Counsel/Corp Sec

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 01 / 2013

Transaction ID : A2013-266948

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

B. Mr. Donald C Findlay

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP General Counsel/Corp Sec

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2013

Transaction ID : A2013-267280

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

c. Mr. Donald C Findlay

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP General Counsel/Corp Sec

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2013

Transaction ID : A2013-541865

Amount of Each Receipt this Period

192.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

576.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 57 OF 250  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Donald C Findlay**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP General Counsel/Corp Sec

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538843**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. Donald C Findlay**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP General Counsel/Corp Sec

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1344.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539173**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Mr. Donald C Findlay**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP General Counsel/Corp Sec

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1536.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721687**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

576.00

**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 58 OF 250

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Mr. Donald C Findlay

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP General Counsel/Corp Sec

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1728.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 26 / 2013

Transaction ID : A2013-2722018

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

B. Mr. Donald C Findlay

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP General Counsel/Corp Sec

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 10 / 2013

Transaction ID : A2013-3224732

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

c. Mr. Donald C Findlay

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP General Counsel/Corp Sec

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2112.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

Transaction ID : A2013-3224404

Amount of Each Receipt this Period

192.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

576.00

# **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 59 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Donald C Findlay**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP General Counsel/Corp Sec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225060**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. Donald C Findlay**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP General Counsel/Corp Sec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290336**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Ms. Christine H Fitzgerald**

Mailing Address 7000 Central Ave NE  
PO Box 1350

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224412**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

404.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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PAGE 60 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Christine H Fitzgerald**

Mailing Address 7000 Central Ave NE  
PO Box 1350

City State Zip Code  
Minneapolis MN 55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225068**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Ms. Christine H Fitzgerald**

Mailing Address 7000 Central Ave NE  
PO Box 1350

City State Zip Code  
Minneapolis MN 55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290344**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Mr. Mark Fletcher**

Mailing Address 6743 Southpoint Dr N

City State Zip Code  
Jacksonville FL 32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Surg Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

02 / 01 / 2013

**Transaction ID : A2013-266692**

Amount of Each Receipt this Period

76.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

116.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

**A. Mr. Mark Fletcher**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Surg Tech

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2013

Transaction ID : A2013-267024

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

**B. Mr. Mark Fletcher**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Surg Tech

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 01 / 2013

Transaction ID : A2013-541608

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

**C. Mr. Mark Fletcher**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Surg Tech

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 15 / 2013

Transaction ID : A2013-538589

Amount of Each Receipt this Period

76.00

SUBTOTAL of Receipts This Page (optional)..... ►

228.00

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 62 OF 250

(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)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

**A. Mr. Mark Fletcher**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Surg Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2013

Transaction ID : A2013-538917

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

**B. Mr. Mark Fletcher**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Surg Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2013

Transaction ID : A2013-2721433

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

**C. Mr. Mark Fletcher**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Surg Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

684.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2013

Transaction ID : A2013-2721762

Amount of Each Receipt this Period

76.00

SUBTOTAL of Receipts This Page (optional)..... ►

228.00

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 63 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Mark Fletcher**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Surg Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224478**

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

**B. Mr. Mark Fletcher**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Surg Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

836.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224147**

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

**C. Mr. Mark Fletcher**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Surg Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224805**

Amount of Each Receipt this Period

76.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

228.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 64 OF 250

(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)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

**A. Mr. Mark Fletcher**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Surg Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

988.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	1			2	0	1	3		

Transaction ID : A2013-3290079

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

**B. Ms. Ann H Fogerson**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr HR Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	4			2	0	1	3		

Transaction ID : A2013-3224187

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Ms. Ann H Fogerson**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr HR Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	7			2	0	1	3		

Transaction ID : A2013-3224845

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

116.00

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 65 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Ann H Fogerson**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr HR Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290119**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Mr. John L Foust**

Mailing Address 710 Medtronic Parkway NE

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Interventional Sale Consultant

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541862**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Mr. John L Foust**

Mailing Address 710 Medtronic Parkway NE

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Interventional Sale Consultant

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538841**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 66 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. John L Foust**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Interventional Sale Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 29 2013

**Transaction ID : A2013-539170**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Mr. John L Foust**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Interventional Sale Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 12 2013

**Transaction ID : A2013-2721685**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Mr. John L Foust**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Interventional Sale Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 26 2013

**Transaction ID : A2013-2722015**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Mr. John L Foust

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Interventional Sale Consultant

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  
 05 10 2013

Transaction ID : A2013-3224730

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mr. John L Foust

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Interventional Sale Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 24 2013

Transaction ID : A2013-3224401

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Mr. John L Foust

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Interventional Sale Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 07 2013

Transaction ID : A2013-3225058

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

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 68 OF 250

(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)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Mr. John L Foust

Mailing Address 710 Medtronic Parkway NE

City	State	Zip Code
Minneapolis	MN	55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Interventional Sale Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2013

Transaction ID : A2013-3290333

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mr. Christopher G Garland

Mailing Address 8200 Coral Sea St NE

City	State	Zip Code
Mounds View	MN	55112-4391

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Communications/PR CVG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2013

Transaction ID : A2013-267240

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

c. Mr. Christopher G Garland

Mailing Address 8200 Coral Sea St NE

City	State	Zip Code
Mounds View	MN	55112-4391

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Communications/PR CVG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2013

Transaction ID : A2013-541823

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)..... ►

170.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Christopher G Garland**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Communications/PR CVG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538804**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**B. Mr. Christopher G Garland**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Communications/PR CVG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539132**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**c. Mr. Christopher G Garland**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Communications/PR CVG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721648**

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

180.00

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Christopher G Garland**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Communications/PR CVG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721977**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**B. Mr. Christopher G Garland**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Communications/PR CVG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224693**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**c. Mr. Christopher G Garland**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Communications/PR CVG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224363**

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

180.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Christopher G Garland**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Communications/PR CVG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225021**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**B. Mr. Christopher G Garland**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Communications/PR CVG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290295**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael C Genau**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President U.S. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 18 / 2013

**Transaction ID : A2013-14684**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

245.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael C Genau**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President U.S. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2013

**Transaction ID : A2013-267005**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael C Genau**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President U.S. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2013

**Transaction ID : A2013-267335**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael C Genau**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President U.S. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

MM / DD / YYYY  
03 / 01 / 2013

**Transaction ID : A2013-541921**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

375.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 73 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael C Genau**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President U.S. Region

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2013

**Transaction ID : A2013-538898**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael C Genau**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President U.S. Region

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2013

**Transaction ID : A2013-539230**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael C Genau**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President U.S. Region

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 12 / 2013

**Transaction ID : A2013-2721742**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

375.00

**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 74 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Mr. Michael C Genau

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President U.S. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 26 / 2013

Transaction ID : A2013-2722074

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Mr. Michael C Genau

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President U.S. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 10 / 2013

Transaction ID : A2013-3224787

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Mr. Michael C Genau

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President U.S. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

Transaction ID : A2013-3224460

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

375.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael C Genau**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President U.S. Region

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225115**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael C Genau**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President U.S. Region

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1625.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290392**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael J Gill**

Mailing Address 18000 Devonshire St

City

Northridge

State

CA

Zip Code

91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Sales Diabetes

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541814**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael J Gill**

Mailing Address 18000 Devonshire St

City State Zip Code  
 Northridge CA 91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Sales Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 15 / 2013

**Transaction ID : A2013-538795**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael J Gill**

Mailing Address 18000 Devonshire St

City State Zip Code  
 Northridge CA 91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Sales Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 29 / 2013

**Transaction ID : A2013-539123**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael J Gill**

Mailing Address 18000 Devonshire St

City State Zip Code  
 Northridge CA 91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Sales Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 12 / 2013

**Transaction ID : A2013-2721639**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael J Gill**

Mailing Address 18000 Devonshire St

City

Northridge

State

CA

Zip Code

91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Sales Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 26 / 2013

**Transaction ID : A2013-2721968**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael J Gill**

Mailing Address 18000 Devonshire St

City

Northridge

State

CA

Zip Code

91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Sales Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 10 / 2013

**Transaction ID : A2013-3224684**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael J Gill**

Mailing Address 18000 Devonshire St

City

Northridge

State

CA

Zip Code

91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Sales Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

**Transaction ID : A2013-3224354**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
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PAGE 78 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael J Gill**

Mailing Address 18000 Devonshire St

City

Northridge

State

CA

Zip Code

91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Sales Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225012**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael J Gill**

Mailing Address 18000 Devonshire St

City

Northridge

State

CA

Zip Code

91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Sales Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290286**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Ms. Nina B Goodheart**

Mailing Address 3540 Unocal Pl

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP RDN Gbl Strat-Therapy Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225054**

Amount of Each Receipt this Period

18.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

118.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Nina B Goodheart**

Mailing Address 3540 Unocal Pl

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP RDN Gbl Strat-Therapy Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290329**

Amount of Each Receipt this Period

18.00

Full Name (Last, First, Middle Initial)

**B. Mr. Matthew R Gover**

Mailing Address 710 Medtronic Parkway NE

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Integrated Spinal Sales Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224402**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Mr. Matthew R Gover**

Mailing Address 710 Medtronic Parkway NE

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Integrated Spinal Sales Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290334**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

98.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Regina E Groves**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM Atrial Fib Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541613**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Ms. Regina E Groves**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM Atrial Fib Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538594**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Ms. Regina E Groves**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM Atrial Fib Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538922**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Ms. Regina E Groves

Mailing Address 8200 Coral Sea St NE

City

State

Zip Code

Mounds View

MN

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Medtronic Inc.

VP/GM Atrial Fib Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 12 / 2013

Transaction ID : A2013-2721438

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Ms. Regina E Groves

Mailing Address 8200 Coral Sea St NE

City

State

Zip Code

Mounds View

MN

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Medtronic Inc.

VP/GM Atrial Fib Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 26 / 2013

Transaction ID : A2013-2721767

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

c. Ms. Regina E Groves

Mailing Address 8200 Coral Sea St NE

City

State

Zip Code

Mounds View

MN

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Medtronic Inc.

VP/GM Atrial Fib Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 10 / 2013

Transaction ID : A2013-3224483

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

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:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Regina E Groves**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM Atrial Fib Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224152**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Ms. Regina E Groves**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM Atrial Fib Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224810**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Ms. Regina E Groves**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM Atrial Fib Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290084**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 83 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Rita A Guzzetta**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Engineering Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

04 / 26 / 2013

Transaction ID : A2013-2722022

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Ms. Rita A Guzzetta**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Engineering Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 10 / 2013

Transaction ID : A2013-3224736

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Ms. Rita A Guzzetta**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Engineering Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 24 / 2013

Transaction ID : A2013-3224408

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 84 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Rita A Guzzetta**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Engineering Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 07 / 2013

**Transaction ID : A2013-3225064**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Ms. Rita A Guzzetta**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Engineering Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 21 / 2013

**Transaction ID : A2013-3290340**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Ms. Elizabeth N Hammack**

Mailing Address 710 Medtronic Parkway NE

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations - Mfg AFS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2013

**Transaction ID : A2013-538581**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

90.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Elizabeth N Hammack**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations - Mfg AFS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538909**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Ms. Elizabeth N Hammack**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations - Mfg AFS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721425**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Ms. Elizabeth N Hammack**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations - Mfg AFS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721754**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

120.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Elizabeth N Hammack**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations - Mfg AFS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224471**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Ms. Elizabeth N Hammack**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations - Mfg AFS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224140**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Ms. Elizabeth N Hammack**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations - Mfg AFS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224798**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

120.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Elizabeth N Hammack**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations - Mfg AFS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290072**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Mr. David Harris Jr.**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Coronary District Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224328**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Mr. David Harris Jr.**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Coronary District Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224986**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

80.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. David Harris Jr.**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Coronary District Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290260**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Ms. Linda Harty**

Mailing Address 710 Medtronic Pkwy

City State Zip Code  
 Minneapolis MN 55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

06 / 19 / 2013

**Transaction ID : A2013-3227468**

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. Mr. Todd A Heinz**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Strategic Accounts Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539174**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

3050.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Todd A Heinz**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Strategic Accounts Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721688**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Mr. Todd A Heinz**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Strategic Accounts Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2722019**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Mr. Todd A Heinz**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Strategic Accounts Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224733**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

90.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Mr. Todd A Heinz

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Strategic Accounts Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 24 / 2013

Transaction ID : A2013-3224405

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Mr. Todd A Heinz

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Strategic Accounts Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 07 / 2013

Transaction ID : A2013-3225061

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Mr. Todd A Heinz

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Strategic Accounts Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 21 / 2013

Transaction ID : A2013-3290337

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

90.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Doug Hoekstra**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Corp Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721774**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mr. Doug Hoekstra**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Corp Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224490**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. Doug Hoekstra**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Corp Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224159**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Doug Hoekstra**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Corp Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224817**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mr. Doug Hoekstra**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Corp Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290091**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. William J Hooper**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Ops/SupplyChain/IT Neuro

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538861**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

90.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. William J Hooper**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Ops/SupplyChain/IT Neuro

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539192**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Mr. William J Hooper**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Ops/SupplyChain/IT Neuro

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721706**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Mr. William J Hooper**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Ops/SupplyChain/IT Neuro

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2722037**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. William J Hooper**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Ops/SupplyChain/IT Neuro

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224751**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Mr. William J Hooper**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Ops/SupplyChain/IT Neuro

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224423**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Mr. William J Hooper**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Ops/SupplyChain/IT Neuro

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225079**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. William J Hooper**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Ops/SupplyChain/IT Neuro

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290355**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Mr. Andrew W Horstman**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Corp Intell Prop Litigation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224239**

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

**C. Mr. Andrew W Horstman**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Corp Intell Prop Litigation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224897**

Amount of Each Receipt this Period

19.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

78.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Andrew W Horstman**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Corp Intell Prop Litigation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290171**

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

**B. Mr. Jeffrey S Hubauer**

Mailing Address 18000 Devonshire St

City

Northridge

State

CA

Zip Code

91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Ops - GM Insulin Delivery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538923**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Mr. Jeffrey S Hubauer**

Mailing Address 18000 Devonshire St

City

Northridge

State

CA

Zip Code

91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Ops - GM Insulin Delivery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721439**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

79.00

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



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Jeffrey S Hubauer**

Mailing Address 18000 Devonshire St

City

Northridge

State

CA

Zip Code

91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Ops - GM Insulin Delivery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721768**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Mr. Jeffrey S Hubauer**

Mailing Address 18000 Devonshire St

City

Northridge

State

CA

Zip Code

91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Ops - GM Insulin Delivery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224484**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Mr. Jeffrey S Hubauer**

Mailing Address 18000 Devonshire St

City

Northridge

State

CA

Zip Code

91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Ops - GM Insulin Delivery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224153**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

90.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Jeffrey S Hubauer**

Mailing Address 18000 Devonshire St

City

Northridge

State

CA

Zip Code

91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Ops - GM Insulin Delivery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224811**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Mr. Jeffrey S Hubauer**

Mailing Address 18000 Devonshire St

City

Northridge

State

CA

Zip Code

91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Ops - GM Insulin Delivery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290085**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Syed Ishrak**

Mailing Address 8035 N. Beach Dr.

City

Fox Point

State

WI

Zip Code

53217

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Chairman/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 19 / 2013

**Transaction ID : A2013-3227469**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

5060.00

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael J Jaro**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Chief IP Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

02 / 01 / 2013

**Transaction ID : A2013-266786**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael J Jaro**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Chief IP Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

02 / 15 / 2013

**Transaction ID : A2013-267118**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael J Jaro**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Chief IP Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541702**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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225.00

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael J Jaro**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Chief IP Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538683**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael J Jaro**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Chief IP Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

525.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539011**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael J Jaro**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Chief IP Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721528**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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225.00

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael J Jaro**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Chief IP Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721857**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael J Jaro**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Chief IP Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224573**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael J Jaro**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Chief IP Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224242**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

225.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael J Jaro**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Chief IP Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224900**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael J Jaro**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Chief IP Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290174**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Mr. Darrell E Johnson**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM Connected Care and Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224398**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

170.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Darrell E Johnson**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM Connected Care and Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225055**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Mr. Darrell E Johnson**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM Connected Care and Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290330**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Ms. Sandra C Kalter**

Mailing Address 950 F St NW  
Ste 500

City

Washington

State

DC

Zip Code

20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel RegulatorySer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541816**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

90.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Sandra C Kalter**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel RegulatorySer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538797**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Ms. Sandra C Kalter**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel RegulatorySer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539125**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Ms. Sandra C Kalter**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel RegulatorySer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721641**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Sandra C Kalter**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel RegulatorySer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721970**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Ms. Sandra C Kalter**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel RegulatorySer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224686**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Ms. Sandra C Kalter**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel RegulatorySer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224356**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Ms. Sandra C Kalter**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel RegulatorySer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225014**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Ms. Sandra C Kalter**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel RegulatorySer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290288**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. Ms. Denise K King**

Mailing Address 710 Medtronic Pkwy

City Minneapolis State MN Zip Code 55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

US Benefits Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224358**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Denise K King**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

US Benefits Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225016**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Ms. Denise K King**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

US Benefits Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290290**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Mr. Douglas J King**

Mailing Address 1800 Pyramid Pl  
Bldg C

City

Memphis

State

TN

Zip Code

38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721951**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

65.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Douglas J King**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
05 / 10 / 2013

**Transaction ID : A2013-3224667**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mr. Douglas J King**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY  
05 / 24 / 2013

**Transaction ID : A2013-3224336**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. Douglas J King**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
06 / 07 / 2013

**Transaction ID : A2013-3224994**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Douglas J King**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY  
06 / 21 / 2013

**Transaction ID : A2013-3290268**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mr. Charles M Kolb**

Mailing Address 8200 Coral Sea St NE

City State Zip Code  
Mounds View MN 55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Commercial Operations SHD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

MM / DD / YYYY  
03 / 15 / 2013

**Transaction ID : A2013-538772**

Amount of Each Receipt this Period

38.46

Full Name (Last, First, Middle Initial)

**C. Mr. Charles M Kolb**

Mailing Address 8200 Coral Sea St NE

City State Zip Code  
Mounds View MN 55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Commercial Operations SHD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.22

Date of Receipt

MM / DD / YYYY  
03 / 29 / 2013

**Transaction ID : A2013-539100**

Amount of Each Receipt this Period

38.46

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

101.92

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Charles M Kolb**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Commercial Operations SHD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.68

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721617**

Amount of Each Receipt this Period

38.46

Full Name (Last, First, Middle Initial)

**B. Mr. Charles M Kolb**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Commercial Operations SHD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721946**

Amount of Each Receipt this Period

38.46

Full Name (Last, First, Middle Initial)

**C. Mr. Charles M Kolb**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Commercial Operations SHD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224662**

Amount of Each Receipt this Period

38.46

**SUBTOTAL** of Receipts This Page (optional)..... ►

115.38

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Charles M Kolb**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Commercial Operations SHD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224331**

Amount of Each Receipt this Period

38.46

Full Name (Last, First, Middle Initial)

**B. Mr. Charles M Kolb**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Commercial Operations SHD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224989**

Amount of Each Receipt this Period

38.46

Full Name (Last, First, Middle Initial)

**C. Mr. Charles M Kolb**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Commercial Operations SHD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290263**

Amount of Each Receipt this Period

38.46

**SUBTOTAL** of Receipts This Page (optional)..... ►

115.38

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Christopher G Landon**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Market Degenerative Spine

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 01 / 2013

**Transaction ID : A2013-266779**

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. Mr. Christopher G Landon**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Market Degenerative Spine

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2013

**Transaction ID : A2013-267111**

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. Mr. Christopher G Landon**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Market Degenerative Spine

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
03 / 01 / 2013

**Transaction ID : A2013-541695**

Amount of Each Receipt this Period

80.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

240.00



# **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 113 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Christopher G Landon**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Market Degenerative Spine

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538676**

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. Mr. Christopher G Landon**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Market Degenerative Spine

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539004**

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. Mr. Christopher G Landon**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Market Degenerative Spine

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721521**

Amount of Each Receipt this Period

80.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

240.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Christopher G Landon**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Market Degenerative Spine

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 26 / 2013

**Transaction ID : A2013-2721850**

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. Mr. Christopher G Landon**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Market Degenerative Spine

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 10 / 2013

**Transaction ID : A2013-3224566**

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. Mr. Christopher G Landon**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Market Degenerative Spine

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

**Transaction ID : A2013-3224235**

Amount of Each Receipt this Period

80.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

240.00

# **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 115 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Christopher G Landon**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Market Degenerative Spine

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

MM / DD / YYYY  
06 / 07 / 2013

**Transaction ID : A2013-3224893**

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. Mr. Christopher G Landon**

Mailing Address 1800 Pyramid Pl  
Bldg C

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Market Degenerative Spine

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

MM / DD / YYYY  
06 / 21 / 2013

**Transaction ID : A2013-3290167**

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. Mr. Timothy G Laske**

Mailing Address 8200 Coral Sea St NE

City State Zip Code  
Mounds View MN 55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Research AF Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

MM / DD / YYYY  
05 / 24 / 2013

**Transaction ID : A2013-3224163**

Amount of Each Receipt this Period

19.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

179.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:  
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Timothy G Laske**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Research AF Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224821**

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

**B. Mr. Timothy G Laske**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Research AF Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290095**

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

**C. Mr. Mark S Lent**

Mailing Address 7000 Central Ave NE  
PO Box 1350

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Engineering Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224202**

Amount of Each Receipt this Period

19.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

57.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Mark S Lent**

Mailing Address 7000 Central Ave NE  
PO Box 1350

City State Zip Code  
Minneapolis MN 55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Engineering Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224860**

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

**B. Mr. Mark S Lent**

Mailing Address 7000 Central Ave NE  
PO Box 1350

City State Zip Code  
Minneapolis MN 55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Engineering Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290134**

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

**C. Ms. Christine E Loth**

Mailing Address 8200 Coral Sea St NE

City State Zip Code  
Mounds View MN 55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Public Rel/Comm/Media Prog Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224274**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

58.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Christine E Loth**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Public Rel/Comm/Media Prog Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224932**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Ms. Christine E Loth**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Public Rel/Comm/Media Prog Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290206**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Mr. James P Mackin**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

01 / 18 / 2013

**Transaction ID : A2013-14614**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

232.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. James P Mackin**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

02 / 01 / 2013

**Transaction ID : A2013-266937**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. James P Mackin**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

02 / 15 / 2013

**Transaction ID : A2013-267269**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Mr. James P Mackin**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541853**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. James P Mackin**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President CRDM

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538832**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. James P Mackin**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President CRDM

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1344.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539161**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Mr. James P Mackin**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President CRDM

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1536.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721676**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. James P Mackin**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1728.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2722006**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. James P Mackin**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224721**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Mr. James P Mackin**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2112.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224392**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. James P Mackin**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225049**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. James P Mackin**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290324**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Mr. Geoffrey S Martha**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Strategy and Business Plng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

01 / 18 / 2013

**Transaction ID : A2013-14677**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00

# **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 123 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Geoffrey S Martha**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Strategy and Business Plng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

02 / 01 / 2013

**Transaction ID : A2013-266999**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. Geoffrey S Martha**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Strategy and Business Plng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

02 / 15 / 2013

**Transaction ID : A2013-267329**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Mr. Geoffrey S Martha**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Strategy and Business Plng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541914**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 124 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Geoffrey S Martha**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Strategy and Business Plng

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538892**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. Geoffrey S Martha**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Strategy and Business Plng

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1344.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539223**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Mr. Geoffrey S Martha**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Strategy and Business Plng

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1536.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721736**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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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)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Geoffrey S Martha**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Strategy and Business Plng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1728.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2722067**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. Geoffrey S Martha**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Strategy and Business Plng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224781**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Mr. Geoffrey S Martha**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Strategy and Business Plng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2112.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224453**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 126 OF 250

(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)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Mr. Geoffrey S Martha

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Strategy and Business Plng

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2013

Transaction ID : A2013-3225109

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

B. Mr. Geoffrey S Martha

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Strategy and Business Plng

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2013

Transaction ID : A2013-3290385

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

C. Mr. Jim McDermid

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP HR CRDM

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2013

Transaction ID : A2013-538593

Amount of Each Receipt this Period

38.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

422.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

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(check only one)

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Jim McDermid**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP HR CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538921**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Mr. Jim McDermid**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP HR CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721437**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Mr. Jim McDermid**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP HR CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721766**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

114.00

# **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 128 OF 250

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Jim McDermid**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP HR CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224482**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Mr. Jim McDermid**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP HR CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224151**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Mr. Jim McDermid**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP HR CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224809**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

114.00



# **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 129 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Jim McDermid**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP HR CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290083**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Mr. John M McDonald**

Mailing Address 710 Medtronic Parkway NE

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr District Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224316**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Mr. John M McDonald**

Mailing Address 710 Medtronic Parkway NE

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr District Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224974**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

78.00

# **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 130 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. John M McDonald**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr District Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290248**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Mr. Kevin M Meyers**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sales Rep Spinal Products

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290386**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Mr. David F Miller**

Mailing Address 1800 Pyramid Pl  
 Bldg D

City State Zip Code  
 Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Medical Societies/Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

01 / 18 / 2013

**Transaction ID : A2013-14364**

Amount of Each Receipt this Period

115.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

175.00

**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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

**A. Mr. David F Miller**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Medical Societies/Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 01 / 2013

Transaction ID : A2013-266688

Amount of Each Receipt this Period

115.00

Full Name (Last, First, Middle Initial)

**B. Mr. David F Miller**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Medical Societies/Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 15 / 2013

Transaction ID : A2013-267020

Amount of Each Receipt this Period

115.00

Full Name (Last, First, Middle Initial)

**C. Mr. David F Miller**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Medical Societies/Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 01 / 2013

Transaction ID : A2013-541604

Amount of Each Receipt this Period

115.00

SUBTOTAL of Receipts This Page (optional)..... ►

345.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. David F Miller**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Medical Societies/Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538585**

Amount of Each Receipt this Period

115.00

Full Name (Last, First, Middle Initial)

**B. Mr. David F Miller**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Medical Societies/Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538913**

Amount of Each Receipt this Period

115.00

Full Name (Last, First, Middle Initial)

**C. Mr. David F Miller**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Medical Societies/Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721429**

Amount of Each Receipt this Period

115.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

345.00

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. David F Miller**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Medical Societies/Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1035.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 26 / 2013

**Transaction ID : A2013-2721758**

Amount of Each Receipt this Period

115.00

Full Name (Last, First, Middle Initial)

**B. Mr. David F Miller**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Medical Societies/Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 10 / 2013

**Transaction ID : A2013-3224475**

Amount of Each Receipt this Period

115.00

Full Name (Last, First, Middle Initial)

**C. Mr. David F Miller**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Medical Societies/Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

**Transaction ID : A2013-3224144**

Amount of Each Receipt this Period

115.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

345.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 134 OF 250

(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)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

**A. Mr. David F Miller**

Mailing Address 1800 Pyramid Pl  
Bldg D

City	State	Zip Code
Memphis	TN	38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Medical Societies/Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2013

Transaction ID : A2013-3224802

Amount of Each Receipt this Period

115.00

Full Name (Last, First, Middle Initial)

**B. Mr. David F Miller**

Mailing Address 1800 Pyramid Pl  
Bldg D

City	State	Zip Code
Memphis	TN	38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Medical Societies/Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1495.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2013

Transaction ID : A2013-3290076

Amount of Each Receipt this Period

115.00

Full Name (Last, First, Middle Initial)

**C. Ms. Michelle A Miller**

Mailing Address 710 Medtronic Pkwy

City	State	Zip Code
Minneapolis	MN	55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel Empl Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	01	/	2013

Transaction ID : A2013-266796

Amount of Each Receipt this Period

80.00

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

310.00

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 135 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Michelle A Miller**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel Empl Law

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2013

**Transaction ID : A2013-267128**

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. Ms. Michelle A Miller**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel Empl Law

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2013

**Transaction ID : A2013-541712**

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. Ms. Michelle A Miller**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel Empl Law

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2013

**Transaction ID : A2013-538693**

Amount of Each Receipt this Period

80.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

240.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Michelle A Miller**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel Empl Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539021**

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. Ms. Michelle A Miller**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel Empl Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721538**

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. Ms. Michelle A Miller**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel Empl Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721867**

Amount of Each Receipt this Period

80.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

240.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Michelle A Miller**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel Empl Law

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224583**

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. Ms. Michelle A Miller**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel Empl Law

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

880.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224252**

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. Ms. Michelle A Miller**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel Empl Law

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

960.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224910**

Amount of Each Receipt this Period

80.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

240.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Michelle A Miller**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/Chief Counsel Empl Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290184**

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. Mr. Daniel J Moelands**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2722025**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. Daniel J Moelands**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224739**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

130.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Daniel J Moelands**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224411**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mr. Daniel J Moelands**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225067**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. Daniel J Moelands**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290343**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. David A Montecalvo**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Product Development SHD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

**Transaction ID : A2013-3224259**

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

**B. Mr. David A Montecalvo**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Product Development SHD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 07 / 2013

**Transaction ID : A2013-3224917**

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

**C. Mr. David A Montecalvo**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Product Development SHD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 21 / 2013

**Transaction ID : A2013-3290191**

Amount of Each Receipt this Period

19.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

57.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Yvonne Moore**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Talent Dev International

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.82

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538571**

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

**B. Ms. Yvonne Moore**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Talent Dev International

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

269.29

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538899**

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

**C. Ms. Yvonne Moore**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Talent Dev International

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

307.76

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721415**

Amount of Each Receipt this Period

38.47

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

115.41

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Yvonne Moore**

Mailing Address 710 Medtronic Pkwy

City State Zip Code  
 Minneapolis MN 55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Talent Dev International

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.23

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 26 / 2013

**Transaction ID : A2013-2721744**

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

**B. Mr. James M Morse**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Sales Rep SQDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 26 / 2013

**Transaction ID : A2013-2722020**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. James M Morse**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Sales Rep SQDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 10 / 2013

**Transaction ID : A2013-3224734**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

88.47

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. James M Morse**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Sales Rep SQDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY  
 05 / 24 / 2013

**Transaction ID : A2013-3224406**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mr. James M Morse**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Sales Rep SQDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
 06 / 07 / 2013

**Transaction ID : A2013-3225062**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. James M Morse**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Sales Rep SQDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY  
 06 / 21 / 2013

**Transaction ID : A2013-3290338**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

**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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael C Morton**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Quality/Reg Aff Prog Dir

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224216**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael C Morton**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Quality/Reg Aff Prog Dir

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224874**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael C Morton**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Quality/Reg Aff Prog Dir

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290148**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

60.00



# **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 145 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Mark A Musto**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541731**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Mr. Mark A Musto**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538712**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Mr. Mark A Musto**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539040**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Mark A Musto**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721557**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Mr. Mark A Musto**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721886**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Mr. Mark A Musto**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224602**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Mark A Musto**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

MM / DD / YYYY  
 05 / 24 / 2013

**Transaction ID : A2013-3224271**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Mr. Mark A Musto**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
 06 / 07 / 2013

**Transaction ID : A2013-3224929**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Mr. Mark A Musto**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

MM / DD / YYYY  
 06 / 21 / 2013

**Transaction ID : A2013-3290203**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

# **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)

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael J Nicoletta**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Ops - PMO MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538573**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael J Nicoletta**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Ops - PMO MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538901**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael J Nicoletta**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Ops - PMO MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721417**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael J Nicoletta**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Ops - PMO MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

MM / DD / YYYY  
04 / 26 / 2013

**Transaction ID : A2013-2721746**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael J Nicoletta**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Ops - PMO MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

MM / DD / YYYY  
05 / 10 / 2013

**Transaction ID : A2013-3224463**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Mr. Michael J Nicoletta**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Ops - PMO MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

MM / DD / YYYY  
05 / 24 / 2013

**Transaction ID : A2013-3224132**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
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PAGE 150 OF 250

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael J Nicoletta**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Ops - PMO MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224790**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael J Nicoletta**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Ops - PMO MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290064**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**c. Mr. Christopher J O'Connell**

Mailing Address 710 Medtronic Pkwy

City State Zip Code  
Minneapolis MN 55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

EVP Restorative Therapies Grp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.62

Date of Receipt

01 / 18 / 2013

**Transaction ID : A2013-14352**

Amount of Each Receipt this Period

192.31

**SUBTOTAL** of Receipts This Page (optional)..... ►

268.31

**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  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Christopher J O'Connell**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

EVP Restorative Therapies Grp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.93

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 01 / 2013

**Transaction ID : A2013-266678**

Amount of Each Receipt this Period

192.31

Full Name (Last, First, Middle Initial)

**B. Mr. Christopher J O'Connell**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

EVP Restorative Therapies Grp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.24

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2013

**Transaction ID : A2013-267010**

Amount of Each Receipt this Period

192.31

Full Name (Last, First, Middle Initial)

**c. Mr. Christopher J O'Connell**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

EVP Restorative Therapies Grp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.55

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2013

**Transaction ID : A2013-541594**

Amount of Each Receipt this Period

192.31

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.93

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Christopher J O'Connell**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

EVP Restorative Therapies Grp

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1153.86

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538575**

Amount of Each Receipt this Period

192.31

Full Name (Last, First, Middle Initial)

**B. Mr. Christopher J O'Connell**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

EVP Restorative Therapies Grp

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1346.17

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538903**

Amount of Each Receipt this Period

192.31

Full Name (Last, First, Middle Initial)

**c. Mr. Christopher J O'Connell**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

EVP Restorative Therapies Grp

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1538.48

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721419**

Amount of Each Receipt this Period

192.31

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.93



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Christopher J O'Connell**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

EVP Restorative Therapies Grp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1730.79

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721748**

Amount of Each Receipt this Period

192.31

Full Name (Last, First, Middle Initial)

**B. Mr. Christopher J O'Connell**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

EVP Restorative Therapies Grp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.10

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224465**

Amount of Each Receipt this Period

192.31

Full Name (Last, First, Middle Initial)

**c. Mr. Christopher J O'Connell**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

EVP Restorative Therapies Grp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.41

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224134**

Amount of Each Receipt this Period

192.31

**SUBTOTAL** of Receipts This Page (optional)..... ►

576.93

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Christopher J O'Connell**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

EVP Restorative Therapies Grp

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2307.72

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224792**

Amount of Each Receipt this Period

192.31

Full Name (Last, First, Middle Initial)

**B. Mr. Christopher J O'Connell**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

EVP Restorative Therapies Grp

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.03

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290066**

Amount of Each Receipt this Period

192.31

Full Name (Last, First, Middle Initial)

**c. Mr. Stephen N Oesterle**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Medicine and Technology

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

01 / 18 / 2013

**Transaction ID : A2013-14375**

Amount of Each Receipt this Period

175.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

559.62

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Stephen N Oesterle**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Medicine and Technology

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 01 / 2013

**Transaction ID : A2013-266699**

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

**B. Mr. Stephen N Oesterle**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Medicine and Technology

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2013

**Transaction ID : A2013-267031**

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

**C. Mr. Stephen N Oesterle**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Medicine and Technology

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2013

**Transaction ID : A2013-541615**

Amount of Each Receipt this Period

175.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

525.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Stephen N Oesterle**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Medicine and Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538596**

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

**B. Mr. Stephen N Oesterle**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Medicine and Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1225.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538924**

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

**c. Mr. Stephen N Oesterle**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Medicine and Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721440**

Amount of Each Receipt this Period

175.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

525.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Stephen N Oesterle**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Medicine and Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1575.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721769**

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

**B. Mr. Stephen N Oesterle**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Medicine and Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224485**

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

**c. Mr. Stephen N Oesterle**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Medicine and Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224154**

Amount of Each Receipt this Period

175.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

525.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Stephen N Oesterle**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Medicine and Technology

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 07 / 2013

**Transaction ID : A2013-3224812**

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

**B. Mr. Stephen N Oesterle**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Medicine and Technology

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 21 / 2013

**Transaction ID : A2013-3290086**

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

**c. Mr. Arlen L Overvig**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Firmware Engineer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2013

**Transaction ID : A2013-267153**

Amount of Each Receipt this Period

52.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

402.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Arlen L Overvig**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541736**

Amount of Each Receipt this Period

52.00

Full Name (Last, First, Middle Initial)

**B. Mr. Arlen L Overvig**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538717**

Amount of Each Receipt this Period

52.00

Full Name (Last, First, Middle Initial)

**C. Mr. Arlen L Overvig**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539045**

Amount of Each Receipt this Period

52.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

156.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Arlen L Overvig**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721562**

Amount of Each Receipt this Period

52.00

Full Name (Last, First, Middle Initial)

**B. Mr. Arlen L Overvig**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721891**

Amount of Each Receipt this Period

52.00

Full Name (Last, First, Middle Initial)

**C. Mr. Arlen L Overvig**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224607**

Amount of Each Receipt this Period

52.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

156.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Arlen L Overvig**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

**Transaction ID : A2013-3224276**

Amount of Each Receipt this Period

52.00

Full Name (Last, First, Middle Initial)

**B. Mr. Arlen L Overvig**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 07 / 2013

**Transaction ID : A2013-3224934**

Amount of Each Receipt this Period

52.00

Full Name (Last, First, Middle Initial)

**C. Mr. Arlen L Overvig**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

676.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 21 / 2013

**Transaction ID : A2013-3290208**

Amount of Each Receipt this Period

52.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

156.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Jacob M Paul**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Surgical Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721631**

Amount of Each Receipt this Period

26.00

Full Name (Last, First, Middle Initial)

**B. Mr. Jacob M Paul**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Surgical Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721960**

Amount of Each Receipt this Period

26.00

Full Name (Last, First, Middle Initial)

**C. Mr. Jacob M Paul**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Surgical Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224676**

Amount of Each Receipt this Period

26.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

78.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Jacob M Paul**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Surgical Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224346**

Amount of Each Receipt this Period

26.00

Full Name (Last, First, Middle Initial)

**B. Mr. Jacob M Paul**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Surgical Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225004**

Amount of Each Receipt this Period

26.00

Full Name (Last, First, Middle Initial)

**C. Mr. Jacob M Paul**

Mailing Address 6743 Southpoint Dr N

City

Jacksonville

State

FL

Zip Code

32216-6218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance Surgical Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290278**

Amount of Each Receipt this Period

26.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

78.00

# **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 164 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Shannon K Pearsall**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Sales Rep CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539150**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Shannon K Pearsall**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Sales Rep CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721665**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Shannon K Pearsall**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Sales Rep CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721995**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

90.00

**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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Shannon K Pearsall**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Sales Rep CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224710**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Shannon K Pearsall**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Sales Rep CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224381**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Shannon K Pearsall**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Sales Rep CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225038**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

90.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Shannon K Pearsall**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Prin Sales Rep CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290313**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Mr. Dominic F Presty**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Manufacturing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538584**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Mr. Dominic F Presty**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Manufacturing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538912**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

106.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Dominic F Presty**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Manufacturing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

MM / DD / YYYY  
04 / 12 / 2013

**Transaction ID : A2013-2721428**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Mr. Dominic F Presty**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Manufacturing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

MM / DD / YYYY  
04 / 26 / 2013

**Transaction ID : A2013-2721757**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Mr. Dominic F Presty**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Manufacturing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

MM / DD / YYYY  
05 / 10 / 2013

**Transaction ID : A2013-3224474**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

114.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Dominic F Presty**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Manufacturing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

**Transaction ID : A2013-3224143**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Mr. Dominic F Presty**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Manufacturing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 07 / 2013

**Transaction ID : A2013-3224801**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Mr. Dominic F Presty**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Manufacturing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 21 / 2013

**Transaction ID : A2013-3290075**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

114.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Pamela M Reitz-Bouren**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538708**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Ms. Pamela M Reitz-Bouren**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539036**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Ms. Pamela M Reitz-Bouren**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721553**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

114.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<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)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Ms. Pamela M Reitz-Bouren

Mailing Address 710 Medtronic Parkway NE

City	State	Zip Code
Minneapolis	MN	55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2013

Transaction ID : A2013-2721882

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

B. Ms. Pamela M Reitz-Bouren

Mailing Address 710 Medtronic Parkway NE

City	State	Zip Code
Minneapolis	MN	55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2013

Transaction ID : A2013-3224598

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

c. Ms. Pamela M Reitz-Bouren

Mailing Address 710 Medtronic Parkway NE

City	State	Zip Code
Minneapolis	MN	55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2013

Transaction ID : A2013-3224267

Amount of Each Receipt this Period

38.00

SUBTOTAL of Receipts This Page (optional)..... ►

114.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Pamela M Reitz-Bouren**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224925**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Ms. Pamela M Reitz-Bouren**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
 Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290199**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Mr. David H Roberts**

Mailing Address 8200 Coral Sea St NE

City State Zip Code  
 Mounds View MN 55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP CVG Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 18 / 2013

**Transaction ID : A2013-14683**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

201.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. David H Roberts**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP CVG Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 01 / 2013

**Transaction ID : A2013-267004**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Mr. David H Roberts**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP CVG Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2013

**Transaction ID : A2013-267334**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Mr. David H Roberts**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP CVG Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2013

**Transaction ID : A2013-541920**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

375.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. David H Roberts**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP CVG Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538897**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Mr. David H Roberts**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP CVG Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539229**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Mr. David H Roberts**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP CVG Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721741**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

375.00

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. David H Roberts**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP CVG Sales

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2722073**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Mr. David H Roberts**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP CVG Sales

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224786**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Mr. David H Roberts**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP CVG Sales

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224459**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

375.00

# **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 175 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. David H Roberts**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP CVG Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225114**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Mr. David H Roberts**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP CVG Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1625.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290391**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Ms. Erin E Rodgers**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Public Rel/Comm Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2722024**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

275.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Erin E Rodgers**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Public Rel/Comm Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224738**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Ms. Erin E Rodgers**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Public Rel/Comm Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224410**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Ms. Erin E Rodgers**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Public Rel/Comm Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225066**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

75.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Ms. Erin E Rodgers**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Public Rel/Comm Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2013

**Transaction ID : A2013-3290342**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Dean E Rustad**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2013

**Transaction ID : A2013-538872**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Dean E Rustad**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2013

**Transaction ID : A2013-539203**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

101.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Dean E Rustad**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721716**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Mr. Dean E Rustad**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2722047**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Mr. Dean E Rustad**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224761**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Dean E Rustad**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224433**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Mr. Dean E Rustad**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225089**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Mr. Dean E Rustad**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Finance CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290365**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(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)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

**A. Mr. Sean M Salmon**

Mailing Address 3540 Unocal PI

City	State	Zip Code
Santa Rosa	CA	95403-1774

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Coronary/RDN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2013

Transaction ID : A2013-3224251

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

**B. Mr. Sean M Salmon**

Mailing Address 3540 Unocal PI

City	State	Zip Code
Santa Rosa	CA	95403-1774

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Coronary/RDN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2013

Transaction ID : A2013-3224909

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

**C. Mr. Sean M Salmon**

Mailing Address 3540 Unocal PI

City	State	Zip Code
Santa Rosa	CA	95403-1774

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP Coronary/RDN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2013

Transaction ID : A2013-3290183

Amount of Each Receipt this Period

19.00

SUBTOTAL of Receipts This Page (optional)..... ►

57.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Ms. Dena L Searce**

Mailing Address 1800 Pyramid Pl  
Bldg A

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Government Affairs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 26 / 2013

**Transaction ID : A2013-2721869**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Ms. Dena L Searce**

Mailing Address 1800 Pyramid Pl  
Bldg A

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Government Affairs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 10 / 2013

**Transaction ID : A2013-3224585**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. Ms. Dena L Searce**

Mailing Address 1800 Pyramid Pl  
Bldg A

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Government Affairs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

**Transaction ID : A2013-3224254**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Ms. Dena L Searce**

Mailing Address 1800 Pyramid Pl  
Bldg A

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Government Affairs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
06 / 07 / 2013

**Transaction ID : A2013-3224912**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Ms. Dena L Searce**

Mailing Address 1800 Pyramid Pl  
Bldg A

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Government Affairs Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY  
06 / 21 / 2013

**Transaction ID : A2013-3290186**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Daniel E Schaber**

Mailing Address 8200 Coral Sea St NE

City State Zip Code  
Mounds View MN 55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Clinical Research CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

MM / DD / YYYY  
03 / 15 / 2013

**Transaction ID : A2013-538864**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

88.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Daniel E Schaber**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Clinical Research CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539195**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Mr. Daniel E Schaber**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Clinical Research CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721708**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Mr. Daniel E Schaber**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Clinical Research CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2722039**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Daniel E Schaber**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Clinical Research CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224753**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Mr. Daniel E Schaber**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Clinical Research CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224425**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Mr. Daniel E Schaber**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Clinical Research CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225081**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

114.00



# **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 185 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Daniel E Schaber**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Clinical Research CRDM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290357**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Ms. Rachael M Scherer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP BusinessDev/Strategy Tachy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538590**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Ms. Rachael M Scherer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP BusinessDev/Strategy Tachy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538918**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

114.00

# **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 186 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Rachael M Scherer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP BusinessDev/Strategy Tachy

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

304.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721434**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Ms. Rachael M Scherer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP BusinessDev/Strategy Tachy

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

342.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721763**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Ms. Rachael M Scherer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP BusinessDev/Strategy Tachy

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

380.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224479**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Rachael M Scherer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP BusinessDev/Strategy Tachy

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

418.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

**Transaction ID : A2013-3224148**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**B. Ms. Rachael M Scherer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP BusinessDev/Strategy Tachy

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 07 / 2013

**Transaction ID : A2013-3224806**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Ms. Rachael M Scherer**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP BusinessDev/Strategy Tachy

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 21 / 2013

**Transaction ID : A2013-3290080**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

114.00

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

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Melissa Schooley**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Health Policy Prog Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2722031**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Ms. Melissa Schooley**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Health Policy Prog Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224745**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Ms. Melissa Schooley**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Health Policy Prog Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224417**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Melissa Schooley**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Health Policy Prog Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225073**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Ms. Melissa Schooley**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Health Policy Prog Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290349**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. Anthony B Semedo**

Mailing Address 3850 Brickway Blvd

City Santa Rosa State CA Zip Code 95403-8223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Endo/Periph

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

02 / 01 / 2013

**Transaction ID : A2013-266895**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Anthony B Semedo**

Mailing Address 3850 Brickway Blvd

City

Santa Rosa

State

CA

Zip Code

95403-8223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Endo/Periph

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2013

**Transaction ID : A2013-267227**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Mr. Anthony B Semedo**

Mailing Address 3850 Brickway Blvd

City

Santa Rosa

State

CA

Zip Code

95403-8223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Endo/Periph

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2013

**Transaction ID : A2013-541810**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Mr. Anthony B Semedo**

Mailing Address 3850 Brickway Blvd

City

Santa Rosa

State

CA

Zip Code

95403-8223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Endo/Periph

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2013

**Transaction ID : A2013-538791**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Anthony B Semedo**

Mailing Address 3850 Brickway Blvd

City

Santa Rosa

State

CA

Zip Code

95403-8223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Endo/Periph

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539119**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Mr. Anthony B Semedo**

Mailing Address 3850 Brickway Blvd

City

Santa Rosa

State

CA

Zip Code

95403-8223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Endo/Periph

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721635**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Mr. Anthony B Semedo**

Mailing Address 3850 Brickway Blvd

City

Santa Rosa

State

CA

Zip Code

95403-8223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Endo/Periph

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721964**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Anthony B Semedo**

Mailing Address 3850 Brickway Blvd

City

Santa Rosa

State

CA

Zip Code

95403-8223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Endo/Periph

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224680**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Mr. Anthony B Semedo**

Mailing Address 3850 Brickway Blvd

City

Santa Rosa

State

CA

Zip Code

95403-8223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Endo/Periph

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224350**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Mr. Anthony B Semedo**

Mailing Address 3850 Brickway Blvd

City

Santa Rosa

State

CA

Zip Code

95403-8223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Endo/Periph

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225008**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

300.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Anthony B Semedo**

Mailing Address 3850 Brickway Blvd

City

Santa Rosa

State

CA

Zip Code

95403-8223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Endo/Periph

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290282**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Ms. Lisa L Shafer**

Mailing Address 800 53rd Ave NE

City

Columbia Heights

State

MN

Zip Code

55421-1241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Research Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224389**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Ms. Lisa L Shafer**

Mailing Address 800 53rd Ave NE

City

Columbia Heights

State

MN

Zip Code

55421-1241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Research Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225046**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

140.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Lisa L Shafer**

Mailing Address 800 53rd Ave NE

City

Columbia Heights

State

MN

Zip Code

55421-1241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Research Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290321**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Vipul B Sheth**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Quality Coro/RDN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538580**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**c. Vipul B Sheth**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Quality Coro/RDN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538908**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Vipul B Sheth**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Quality Coro/RDN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 12 / 2013

**Transaction ID : A2013-2721424**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Vipul B Sheth**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Quality Coro/RDN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 26 / 2013

**Transaction ID : A2013-2721753**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Vipul B Sheth**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Quality Coro/RDN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 10 / 2013

**Transaction ID : A2013-3224470**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

120.00

**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:  
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Vipul B Sheth**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Quality Coro/RDN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

**Transaction ID : A2013-3224139**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Vipul B Sheth**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Quality Coro/RDN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 07 / 2013

**Transaction ID : A2013-3224797**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Vipul B Sheth**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Global Quality Coro/RDN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 21 / 2013

**Transaction ID : A2013-3290071**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Ron Shettler**

Mailing Address 1775 Pyramid Pl

City

Memphis

State

TN

Zip Code

38132-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Info Tech Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2013

**Transaction ID : A2013-267048**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**B. Mr. Ron Shettler**

Mailing Address 1775 Pyramid Pl

City

Memphis

State

TN

Zip Code

38132-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Info Tech Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
03 / 01 / 2013

**Transaction ID : A2013-541632**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**C. Mr. Ron Shettler**

Mailing Address 1775 Pyramid Pl

City

Memphis

State

TN

Zip Code

38132-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Info Tech Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

MM / DD / YYYY  
03 / 15 / 2013

**Transaction ID : A2013-538613**

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

180.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Ron Shettler**

Mailing Address 1775 Pyramid Pl

City

Memphis

State

TN

Zip Code

38132-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Info Tech Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538941**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**B. Mr. Ron Shettler**

Mailing Address 1775 Pyramid Pl

City

Memphis

State

TN

Zip Code

38132-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Info Tech Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721457**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**C. Mr. Ron Shettler**

Mailing Address 1775 Pyramid Pl

City

Memphis

State

TN

Zip Code

38132-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Info Tech Spinal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721786**

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

180.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Ron Shettler**

Mailing Address 1775 Pyramid Pl

City

Memphis

State

TN

Zip Code

38132-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Info Tech Spinal

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 10 / 2013

**Transaction ID : A2013-3224502**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**B. Mr. Ron Shettler**

Mailing Address 1775 Pyramid Pl

City

Memphis

State

TN

Zip Code

38132-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Info Tech Spinal

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

**Transaction ID : A2013-3224171**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**C. Mr. Ron Shettler**

Mailing Address 1775 Pyramid Pl

City

Memphis

State

TN

Zip Code

38132-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Info Tech Spinal

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 07 / 2013

**Transaction ID : A2013-3224829**

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

180.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Ron Shettler**

Mailing Address 1775 Pyramid Pl

City

Memphis

State

TN

Zip Code

38132-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Info Tech Spinal

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290103**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Peter B Slone**

Mailing Address 950 F St NW  
Ste 500

City

Washington

State

DC

Zip Code

20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Government Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

384.00

Date of Receipt

01 / 18 / 2013

**Transaction ID : A2013-14357**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Peter B Slone**

Mailing Address 950 F St NW  
Ste 500

City

Washington

State

DC

Zip Code

20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Government Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

576.00

Date of Receipt

02 / 01 / 2013

**Transaction ID : A2013-266682**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

444.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Peter B Slone**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2013

**Transaction ID : A2013-267014**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Peter B Slone**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2013

**Transaction ID : A2013-541598**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Peter B Slone**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2013

**Transaction ID : A2013-538579**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Peter B Slone**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1344.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538907**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Peter B Slone**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1536.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721423**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Peter B Slone**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1728.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721752**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Peter B Slone**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224469**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. Peter B Slone**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2112.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224138**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Mr. Peter B Slone**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224796**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

576.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

## **A. Mr. Peter B Slone**

Mailing Address 950 F St NW  
Ste 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290070**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

## **B. Mr. James D Southwick**

Mailing Address 710 Medtronic Pkwy

City Minneapolis State MN Zip Code 55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Deputy Counsel Intl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539129**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

## **C. Mr. James D Southwick**

Mailing Address 710 Medtronic Pkwy

City Minneapolis State MN Zip Code 55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Deputy Counsel Intl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721645**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

252.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

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(check only one)

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. James D Southwick**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Deputy Counsel Intl

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

04 / 26 / 2013

Transaction ID : A2013-2721974

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Mr. James D Southwick**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Deputy Counsel Intl

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 10 / 2013

Transaction ID : A2013-3224690

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Mr. James D Southwick**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Deputy Counsel Intl

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

330.00

Date of Receipt

05 / 24 / 2013

Transaction ID : A2013-3224360

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

90.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. James D Southwick**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Deputy Counsel Intl

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 07 / 2013

**Transaction ID : A2013-3225018**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Mr. James D Southwick**

Mailing Address 710 Medtronic Pkwy

City

Minneapolis

State

MN

Zip Code

55432-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP and Deputy Counsel Intl

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 21 / 2013

**Transaction ID : A2013-3290292**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**c. Ms. Margaret B Strom**

Mailing Address 800 53rd Ave NE

City

Columbia Heights

State

MN

Zip Code

55421-1241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Finance Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

**Transaction ID : A2013-3224422**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

80.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Margaret B Strom**

Mailing Address 800 53rd Ave NE

City

Columbia Heights

State

MN

Zip Code

55421-1241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225078**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Ms. Margaret B Strom**

Mailing Address 800 53rd Ave NE

City

Columbia Heights

State

MN

Zip Code

55421-1241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290354**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Chandramohan Subramaniam**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations MMC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541809**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

90.00

**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 208 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Chandramohan Subramaniam**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations MMC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538790**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Chandramohan Subramaniam**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations MMC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539118**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Chandramohan Subramaniam**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations MMC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721634**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 209 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Chandramohan Subramaniam**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations MMC

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 26 / 2013

**Transaction ID : A2013-2721963**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Chandramohan Subramaniam**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations MMC

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 10 / 2013

**Transaction ID : A2013-3224679**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Chandramohan Subramaniam**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations MMC

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

**Transaction ID : A2013-3224349**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

150.00

**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  
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FOR LINE NUMBER:  
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PAGE 210 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Chandramohan Subramaniam**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations MMC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225007**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Chandramohan Subramaniam**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Operations MMC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290281**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Ms. Virginia A Suttle**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541793**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 211 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Virginia A Suttle**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Supply Chain Planning Dir

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538774**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Ms. Virginia A Suttle**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Supply Chain Planning Dir

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-539102**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Ms. Virginia A Suttle**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Supply Chain Planning Dir

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721619**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

# **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 212 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Virginia A Suttle**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721948**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Ms. Virginia A Suttle**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224664**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Ms. Virginia A Suttle**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224333**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

# **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 213 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Virginia A Suttle**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224991**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Ms. Virginia A Suttle**

Mailing Address 7000 Central Ave NE

City

Minneapolis

State

MN

Zip Code

55432-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290265**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Ms. Catherine M Szyman**

Mailing Address 18000 Devonshire St

City

Northridge

State

CA

Zip Code

91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541627**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 214 OF 250

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Catherine M Szyman**

Mailing Address 18000 Devonshire St

City State Zip Code  
 Northridge CA 91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 15 / 2013

**Transaction ID : A2013-538608**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Ms. Catherine M Szyman**

Mailing Address 18000 Devonshire St

City State Zip Code  
 Northridge CA 91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 29 / 2013

**Transaction ID : A2013-538936**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Ms. Catherine M Szyman**

Mailing Address 18000 Devonshire St

City State Zip Code  
 Northridge CA 91325-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 12 / 2013

**Transaction ID : A2013-2721452**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 215 OF 250

(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)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Ms. Catherine M Szyman**

Mailing Address 18000 Devonshire St

City	State	Zip Code
Northridge	CA	91325-1219

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2013

**Transaction ID : A2013-2721781**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Ms. Catherine M Szyman**

Mailing Address 18000 Devonshire St

City	State	Zip Code
Northridge	CA	91325-1219

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Diabetes

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
05	/	10	/	2013

**Transaction ID : A2013-3224497**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Ms. Catherine M Szyman**

Mailing Address 18000 Devonshire St

City	State	Zip Code
Northridge	CA	91325-1219

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2013

**Transaction ID : A2013-3224166**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 216 OF 250

(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)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Ms. Catherine M Szyman

Mailing Address 18000 Devonshire St

City	State	Zip Code
Northridge	CA	91325-1219

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2013

Transaction ID : A2013-3224824

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Ms. Catherine M Szyman

Mailing Address 18000 Devonshire St

City	State	Zip Code
Northridge	CA	91325-1219

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

SVP and President Diabetes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2013

Transaction ID : A2013-3290098

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Mr. Michael B Terry

Mailing Address 710 Medtronic Parkway NE

City	State	Zip Code
Minneapolis	MN	55432

FEC ID number of contributing federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2013

Transaction ID : A2013-3224224

Amount of Each Receipt this Period

19.00

SUBTOTAL of Receipts This Page (optional)..... ►

119.00

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 217 OF 250

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael B Terry**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224882**

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

**B. Mr. Michael B Terry**

Mailing Address 710 Medtronic Parkway NE

City State Zip Code  
Minneapolis MN 55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290156**

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

**C. Mr. Matthew F Thomas**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Interventional Therapies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.53

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224213**

Amount of Each Receipt this Period

19.23

**SUBTOTAL** of Receipts This Page (optional)..... ►

57.23

**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  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Matthew F Thomas**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Interventional Therapies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

MM / DD / YYYY  
06 / 07 / 2013

**Transaction ID : A2013-3224871**

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

**B. Mr. Matthew F Thomas**

Mailing Address 1800 Pyramid Pl  
Bldg D

City State Zip Code  
Memphis TN 38132-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP Interventional Therapies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

MM / DD / YYYY  
06 / 21 / 2013

**Transaction ID : A2013-3290145**

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

**C. Mr. Mark E Thomassy**

Mailing Address 575 Lynnhaven Pkwy  
Marsh Landing Ste 250

City State Zip Code  
Virginia Beach VA 23452-7350

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Corporate Sales Dir MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
04 / 26 / 2013

**Transaction ID : A2013-2721985**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

63.46

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Mark E Thomassy**

Mailing Address 575 Lynnhaven Pkwy  
Marsh Landing Ste 250

City State Zip Code  
Virginia Beach VA 23452-7350

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Corporate Sales Dir MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224701**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mr. Mark E Thomassy**

Mailing Address 575 Lynnhaven Pkwy  
Marsh Landing Ste 250

City State Zip Code  
Virginia Beach VA 23452-7350

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Corporate Sales Dir MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224371**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. Mark E Thomassy**

Mailing Address 575 Lynnhaven Pkwy  
Marsh Landing Ste 250

City State Zip Code  
Virginia Beach VA 23452-7350

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Corporate Sales Dir MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3225029**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Mark E Thomassy**

Mailing Address 575 Lynnhaven Pkwy  
Marsh Landing Ste 250

City State Zip Code  
Virginia Beach VA 23452-7350

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Corporate Sales Dir MSB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290303**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mr. Alan Tillis**

Mailing Address 51 James Way

City State Zip Code  
Eatontown NJ 07724-2272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Medical Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2722060**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. Alan Tillis**

Mailing Address 51 James Way

City State Zip Code  
Eatontown NJ 07724-2272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Medical Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224774**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Alan Tillis**

Mailing Address 51 James Way

City

Eatontown

State

NJ

Zip Code

07724-2272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Medical Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

**Transaction ID : A2013-3224446**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mr. Alan Tillis**

Mailing Address 51 James Way

City

Eatontown

State

NJ

Zip Code

07724-2272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Medical Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 07 / 2013

**Transaction ID : A2013-3225102**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. Alan Tillis**

Mailing Address 51 James Way

City

Eatontown

State

NJ

Zip Code

07724-2272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

Medical Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 21 / 2013

**Transaction ID : A2013-3290378**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Brian D Urke**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM CRDM Brady

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

01 / 18 / 2013

**Transaction ID : A2013-14353**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. Brian D Urke**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM CRDM Brady

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

02 / 01 / 2013

**Transaction ID : A2013-266679**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Mr. Brian D Urke**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM CRDM Brady

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

02 / 15 / 2013

**Transaction ID : A2013-267011**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Brian D Urke**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM CRDM Brady

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

03 / 01 / 2013

**Transaction ID : A2013-541595**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. Brian D Urke**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM CRDM Brady

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 15 / 2013

**Transaction ID : A2013-538576**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**c. Mr. Brian D Urke**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM CRDM Brady

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1344.00

Date of Receipt

03 / 29 / 2013

**Transaction ID : A2013-538904**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Brian D Urke**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM CRDM Brady

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1536.00

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721420**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. Brian D Urke**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM CRDM Brady

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1728.00

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721749**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Mr. Brian D Urke**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM CRDM Brady

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224466**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Brian D Urke**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM CRDM Brady

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2112.00

Date of Receipt

05 / 24 / 2013

**Transaction ID : A2013-3224135**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**B. Mr. Brian D Urke**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM CRDM Brady

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

06 / 07 / 2013

**Transaction ID : A2013-3224793**

Amount of Each Receipt this Period

192.00

Full Name (Last, First, Middle Initial)

**C. Mr. Brian D Urke**

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM CRDM Brady

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : A2013-3290067**

Amount of Each Receipt this Period

192.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

576.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Jason R Weidman**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM Coronary

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

215.36

Date of Receipt

04 / 12 / 2013

**Transaction ID : A2013-2721626**

Amount of Each Receipt this Period

26.92

Full Name (Last, First, Middle Initial)

**B. Mr. Jason R Weidman**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM Coronary

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

242.28

Date of Receipt

04 / 26 / 2013

**Transaction ID : A2013-2721955**

Amount of Each Receipt this Period

26.92

Full Name (Last, First, Middle Initial)

**C. Mr. Jason R Weidman**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM Coronary

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

269.20

Date of Receipt

05 / 10 / 2013

**Transaction ID : A2013-3224671**

Amount of Each Receipt this Period

26.92

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

80.76

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Mr. Jason R Weidman**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM Coronary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.12

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2013

**Transaction ID : A2013-3224340**

Amount of Each Receipt this Period

26.92

Full Name (Last, First, Middle Initial)

**B. Mr. Jason R Weidman**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM Coronary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.04

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 07 / 2013

**Transaction ID : A2013-3224998**

Amount of Each Receipt this Period

26.92

Full Name (Last, First, Middle Initial)

**C. Mr. Jason R Weidman**

Mailing Address 3540 Unocal PI

City

Santa Rosa

State

CA

Zip Code

95403-1774

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medtronic Inc.

Occupation

VP/GM Coronary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.96

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 21 / 2013

**Transaction ID : A2013-3290272**

Amount of Each Receipt this Period

26.92

**SUBTOTAL** of Receipts This Page (optional)..... ►

80.76

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

60717.45

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 228 OF 250

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. National Association of Business PACs**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2013

Mailing Address 101 Constitution Ave. NW Ste L110

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement  
Membership Dues

012

Candidate Name

Category/  
Type**Transaction ID : B448763**

Amount of Each Disbursement this Period

3000.00
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2013

☐ Primary    ☐ General☒ Other (specify) ▼

Not Applicable

State: DC

District:

Full Name (Last, First, Middle Initial)

**B. Bank of America N.A.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2013

Mailing Address P.O. Box 27128

City	State	Zip Code
Concord	CA	94520

Purpose of Disbursement  
Bank Service Charge

001

Candidate Name

Category/  
Type**Transaction ID : B460451**

Amount of Each Disbursement this Period

63.25
-------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2013

☐ Primary    ☐ General☒ Other (specify) ▼

Not Applicable

State: US

District:

Full Name (Last, First, Middle Initial)

**C. Bank of America N.A.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		31		2013

Mailing Address P.O. Box 27128

City	State	Zip Code
Concord	CA	94520

Purpose of Disbursement  
Bank Service Charge

001

Candidate Name

Category/  
Type**Transaction ID : B460452**

Amount of Each Disbursement this Period

61.36
-------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2013

☐ Primary    ☐ General☒ Other (specify) ▼

Not Applicable

State: US

District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3124.61

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 229 OF 250

<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

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Bank of America N.A.**

Mailing Address P.O. Box 27128

City	State	Zip Code
Concord	CA	94520

Purpose of Disbursement  
Bank Service Charge

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: US

District:

Disbursement For: 2013

☐ Primary ☐ General☒ Other (specify) ▼

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2013

**Transaction ID : B460453**

Amount of Each Disbursement this Period

61.54
-------

Full Name (Last, First, Middle Initial)

**B. Public Affairs Support Services Inc.**

Mailing Address 1950 Roland Clarke Place Suite 300

City	State	Zip Code
Reston	VA	20191

Purpose of Disbursement  
Admin expen-Report prep.

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: VA

District:

Disbursement For: 2013

☐ Primary ☐ General☒ Other (specify) ▼

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2013

**Transaction ID : B448765**

Amount of Each Disbursement this Period

1868.83
---------

Full Name (Last, First, Middle Initial)

**C. Public Affairs Support Services Inc.**

Mailing Address 1950 Roland Clarke Place Suite 300

City	State	Zip Code
Reston	VA	20191

Purpose of Disbursement  
Admin expen-Report prep.

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: VA

District:

Disbursement For: 2013

☐ Primary ☐ General☒ Other (specify) ▼

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2013

**Transaction ID : B450420**

Amount of Each Disbursement this Period

3757.09
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5687.46
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 230 OF 250

<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

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NAME OF COMMITTEE (In Full)

**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Public Affairs Support Services Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2013

Mailing Address 1950 Roland Clarke Place Suite 300

City	State	Zip Code
Reston	VA	20191

Purpose of Disbursement  
Admin expen-Report prep.

001

Candidate Name

Category/  
Type**Transaction ID : B452486**

Amount of Each Disbursement this Period

1889.93
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2013

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State: VA

District:

Full Name (Last, First, Middle Initial)

**B. Public Affairs Support Services Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2013

Mailing Address 1950 Roland Clarke Place Suite 300

City	State	Zip Code
Reston	VA	20191

Purpose of Disbursement  
Admin expen-Report prep.

001

Candidate Name

Category/  
Type**Transaction ID : B457145**

Amount of Each Disbursement this Period

1872.42
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2013

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State: VA

District:

Full Name (Last, First, Middle Initial)

**C. Public Affairs Support Services Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2013

Mailing Address 1950 Roland Clarke Place Suite 300

City	State	Zip Code
Reston	VA	20191

Purpose of Disbursement  
Admin expen-Report prep.

001

Candidate Name

Category/  
Type**Transaction ID : B457148**

Amount of Each Disbursement this Period

1857.19
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2013

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State: VA

District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5619.54

14431.61

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 231 OF 250

<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. Salmon for Congress**

Mailing Address PO Box 2590

City  
AlexandriaState  
VAZip Code  
22301Purpose of Disbursement  
Contribution

011

Candidate Name

**Matt Salmon**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ

District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2013

**Transaction ID : B448752**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Kevin McCarthy for Congress**

Mailing Address 213 Ashby Street

City  
AlexandriaState  
VAZip Code  
22305Purpose of Disbursement  
Contribution

011

Candidate Name

**Kevin McCarthy**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2013

**Transaction ID : B452477**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. Devin Nunes Campaign Cmte**

Mailing Address PO Box 6545

City  
VisaliaState  
CAZip Code  
93290Purpose of Disbursement  
Contribution

011

Candidate Name

**Devin Nunes**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 22

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2013

**Transaction ID : B452478**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00
---------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 232 OF 250

<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. Mike Thompson for Congress**

Mailing Address 236 Massachusetts Ave. NE #603

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mike Thompson**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 05

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	14	/	2013

**Transaction ID : B455951**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. Bennet for Colorado**

Mailing Address 236 Massachusetts Ave. NE #209

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Michael Bennet**Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

State: CO District:

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	27	/	2013

**Transaction ID : B448751**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Diana Degette for Congress Inc.**

Mailing Address P.O. Box 61337

City	State	Zip Code
Denver	CO	80206

Purpose of Disbursement  
Contribution

011

Candidate Name

**Diana L DeGette**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CO District: 01

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	26	/	2013

**Transaction ID : B457123**

Amount of Each Disbursement this Period

500.00
--------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 233 OF 250

<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. Udall for Colorado**

Mailing Address PO Box 40158

City	State	Zip Code
Denver	CO	80204

Purpose of Disbursement  
Contribution

Candidate Name

**Mark Udall**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: CO District:

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2013

**Transaction ID : B457132**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Friends of Chris Murphy**

Mailing Address 410 1st St. SE Suite 310

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

Candidate Name

**Christopher Murphy**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: CT District:

Disbursement For: 2012
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Debt Ret General

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2013

**Transaction ID : B452481**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Georgians for Isakson**

Mailing Address 900 19th St. NW 8th Floor

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement  
Contribution

Candidate Name

**Johnny Isakson**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: GA District:

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2013

**Transaction ID : B447103**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00
---------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 234 OF 250

<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. Price for Congress**

Mailing Address P.O. Box 425

City	State	Zip Code
Roswell	GA	30077

Purpose of Disbursement  
Contribution

Candidate Name

**Thomas E Price**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2013

**Transaction ID : B448760**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Volunteers for Shimkus**

Mailing Address 499 S. Capitol St. SW Suite 420

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

Candidate Name

**John M Shimkus**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2013

**Transaction ID : B452484**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. Davis for Congress**

Mailing Address 5956 W. Race Avenue

City	State	Zip Code
Chicago	IL	60644

Purpose of Disbursement  
Contribution

Candidate Name

**Danny K Davis**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2013

**Transaction ID : B457127**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 235 OF 250

<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. Dan Coats for Indiana**

Mailing Address 499 S. Capitol St. SW Suite 420

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

**Dan Coats**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2013

**Transaction ID : B455944**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Stutzman for Congress**

Mailing Address 499 S. Capitol St. SW Suite 420

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

**Marlin Stutzman**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN

District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2013

**Transaction ID : B455962**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Guthrie for Congress**

Mailing Address 499 S. Capitol St. SW Suite 420

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

**Brett Guthrie**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: KY

District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2013

**Transaction ID : B455958**

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)..... ►

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 236 OF 250

<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. Charles Boustany Jr for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2013

Mailing Address PO Box 80126

City Lafayette	State LA	Zip Code 70598
-------------------	-------------	-------------------

**Transaction ID : B457125**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**Charles W Boustany Jr.**Category/  
Type

1000.00
---------

Office Sought:



House

Disbursement For: 2014



Primary



General



Other (specify) ▼

State: LA

District: 03

Full Name (Last, First, Middle Initial)

**B. Richard Neal for Congress Cmte**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2013

Mailing Address 50 E St. SE Suite 1

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

**Transaction ID : B450419**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**Richard E Neal**Category/  
Type

1000.00
---------

Office Sought:



House

Disbursement For: 2014



Primary



General



Other (specify) ▼

State: MA

District: 01

Full Name (Last, First, Middle Initial)

**C. Hoyer for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2013

Mailing Address 700 13th St. NW #600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

**Transaction ID : B457131**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**Steny H Hoyer**Category/  
Type

1000.00
---------

Office Sought:



House

Disbursement For: 2014



Primary



General



Other (specify) ▼

State: MD

District: 05

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 237 OF 250

<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. Collins for Senator**

Mailing Address PO Box 1096

City	State	Zip Code
Bangor	ME	04402

Purpose of Disbursement  
Contribution

011

Candidate Name

**Susan M Collins**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: ME District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2013

**Transaction ID : B457133**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**B. Dave Camp for Congress**

Mailing Address 5915 Eastman Ave. Suite 100

City	State	Zip Code
Midland	MI	48640

Purpose of Disbursement  
Contribution

011

Candidate Name

**Dave Camp**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MI District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2013

**Transaction ID : B447111**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. Rogers for Congress**

Mailing Address 499 S. Capitol St. Suite 420

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mike J Rogers**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2013

**Transaction ID : B448758**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00
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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Medtronic Inc. PAC

04 / 29 / 2013

011

1000.00

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

MM / DD / YYYY

011

2000.00

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

The image shows three 3x3 grids, each representing a number using the letters M, D, and Y. The first grid shows '01' with 'M' in the top-left and top-right positions. The second grid shows '31' with 'D' in the top-left and top-right positions. The third grid shows '2013' with 'Y' in the top-left, top-right, middle-right, and bottom-right positions.

011

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

4000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 239 OF 250

<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 Erik Paulsen**

Mailing Address POB 44369 250 Prairie Center Dr.

City	State	Zip Code
Eden Prairie	MN	55344

Purpose of Disbursement  
Contribution

011

Candidate Name

**Erik Paulsen**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		31		2013

**Transaction ID : B447108**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. Friends of Erik Paulsen**

Mailing Address P.O. Box 44369 250 Prairie Center

City	State	Zip Code
Eden Prairie	MN	55344

Purpose of Disbursement  
Contribution

011

Candidate Name

**Erik Paulsen**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2013

**Transaction ID : B448753**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Al Franken for Senate**

Mailing Address 236 Massachusetts Ave. NE #202

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Al Franken**Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2013

**Transaction ID : B455952**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 240 OF 250

<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. Al Franken for Senate**

Mailing Address 236 Massachusetts Ave. NE #202

City Washington	State DC	Zip Code 20002
--------------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

**Al Franken**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2013

**Transaction ID : B455954**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. Kline for Congress**

Mailing Address 1006 Pendleton Street

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

**John Kline**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN

District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2013

**Transaction ID : B455948**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Friends of Erik Paulsen**

Mailing Address 1006 Pendleton Street

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

**Erik Paulsen**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN

District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2013

**Transaction ID : B455950**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 241 OF 250

<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. Hagan for US Senate Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2013

Mailing Address 220 I Street NE Suite 250

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Kay R Hagan**Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

State: NC District:

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID : B455959**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Friends of Jeanne Shaheen**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2013

Mailing Address 1010 Vermont Ave. NW Suite 814

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Contribution

011

Candidate Name

**Jeanne Shaheen**Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

State: NH District:

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID : B447104**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Friends of Kelly Ayotte**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2013

Mailing Address 499 S. Capitol St. SW Suite 420

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Kelly Ayotte**Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

State: NH District:

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID : B448762**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 242 OF 250

<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 Kelly Ayotte**

Mailing Address PO Box 937

City Manchester	State NH	Zip Code 03105
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Purpose of Disbursement  
Contribution

011

Candidate Name

**Kelly Ayotte**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2013

**Transaction ID : B452475**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Friends of Jeanne Shaheen**

Mailing Address 105 N State Street

City Concord	State NH	Zip Code 03301
-----------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

**Jeanne Shaheen**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2013

**Transaction ID : B457126**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. Portman for Senate Committee**

Mailing Address 900 19th St. NW 8th Floor

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rob Portman**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2013

**Transaction ID : B452482**

Amount of Each Disbursement this Period

2000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 243 OF 250

<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. Wyden for Senate**

Mailing Address 232 NE 9th Avenue

City Portland	State OR	Zip Code 97232
------------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ron Wyden**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OR

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2013

**Transaction ID : B457129**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**B. Allyson Schwartz for Congress**

Mailing Address 303 Massachusetts Ave. NE

City Washington	State DC	Zip Code 20002
--------------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

**Allyson Schwartz**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA

District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2013

**Transaction ID : B448757**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Friends of Joe Pitts**

Mailing Address 1707 Prince St. Suite 5

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

**Joseph R Pitts**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA

District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2013

**Transaction ID : B452479**

Amount of Each Disbursement this Period

2000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 244 OF 250

<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. Diane Black for Congress**

Mailing Address PO Box 1437

City	State	Zip Code
Gallatin	TN	37066

Purpose of Disbursement  
Contribution

011

Candidate Name

**Diane L Black**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		31		2013

**Transaction ID : B447109**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Alexander for Senate Inc.**

Mailing Address 1222 16th Avenue South #10

City	State	Zip Code
Nashville	TN	37212

Purpose of Disbursement  
Contribution

011

Candidate Name

**Lamar Alexander**Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2013

**Transaction ID : B452485**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Marsha Blackburn for Congress Inc.**

Mailing Address 499 S. Capitol St. SW Suite 240

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Marsha Blackburn**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2013

**Transaction ID : B455946**

Amount of Each Disbursement this Period

2000.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 245 OF 250

<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. Marsha Blackburn for Congress Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		27		2013

Mailing Address PO Box 3750

City	State	Zip Code
Brentwood	TN	37024

**Transaction ID : B457326**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**Marsha Blackburn**Category/  
Type

2000.00
---------

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 07

Full Name (Last, First, Middle Initial)

**B. Texans for Senator John Cornyn Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2013

Mailing Address 1020 N. Fairfax St. Suite 201

City	State	Zip Code
Alexandria	VA	22314

**Transaction ID : B448759**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**John Cornyn**Category/  
Type

1000.00
---------

Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District:

Full Name (Last, First, Middle Initial)

**C. Michael Burgess for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2013

Mailing Address 217 Third Street SE

City	State	Zip Code
Washington	DC	20003

**Transaction ID : B452476**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**Michael C. Burgess**Category/  
Type

2000.00
---------

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 26

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 246 OF 250

<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. House Conservatives Fund**

Mailing Address 228 S. Washington St. Suite 115

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: TX District:

Disbursement For: 2013

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2013

**Transaction ID : B455949**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Friends of Pete Gallego**

Mailing Address P.O. Box 1781

City	State	Zip Code
San Antonio	TX	78296

Purpose of Disbursement  
Contribution

Candidate Name

**Pete Gallego**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: TX District: 23

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2013

**Transaction ID : B457130**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. Moderate Democrats PAC**

Mailing Address 303 Massachusetts Ave. NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: US District:

Disbursement For: 2013

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2013

**Transaction ID : B447110**

Amount of Each Disbursement this Period

5000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 247 OF 250

<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. New Democrat Coalition PAC**

Mailing Address 700 13th Street NW #600

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: US

District:

Disbursement For: 2013

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2013

**Transaction ID : B448826**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. AdvaMed PAC**

Mailing Address 701 Pennsylvania Ave. NW Suite 800

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: US

District:

Disbursement For: 2013

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2013

**Transaction ID : B449174**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Blue Dog Political Action Cmte**

Mailing Address 6849 Old Dominion Dr. Suite 222

City	State	Zip Code
Mclean	VA	22101

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: US

District:

Disbursement For: 2013

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2013

**Transaction ID : B455943**

Amount of Each Disbursement this Period

5000.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 248 OF 250

<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. Orrinpac**

Mailing Address 6510 Anna Maria Court

City	State	Zip Code
McLean	VA	22101

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: UT

District:

Disbursement For: 2013

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2013

**Transaction ID : B450418**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Kind for Congress Committee**

Mailing Address 233 Pennsylvania Ave. SE 2nd Fl.

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

Candidate Name

**Ron J Kind**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: WI

District: 03

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2013

**Transaction ID : B448754**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. Kind for Congress Committee**

Mailing Address 233 Pennsylvania Ave. SE 2nd Fl.

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

Candidate Name

**Ron J Kind**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: WI

District: 03

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2013

**Transaction ID : B452483**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00
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	21b		22	<b>X</b>	23		24		25		26
	27		28a		28b		28c		29		30b

Medtronic Inc. PAC

### A. Friends of John Barrasso

Date of Disbursement



Transaction ID : B448761

011

Category/  
Type

Disbursement For: 2018

☒ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

**B.**

Date of Disbursement

### Purpose of Disbursement

Candidate Name

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

City	State	Zip Code
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### Purpose of Disbursement

Candidate Name

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

A diagram of a rectangular frame. It consists of a horizontal beam at the top and a horizontal beam at the bottom, connected by vertical supports. The top beam has several small rectangular protrusions along its length. The bottom beam has several small rectangular protrusions along its length, with some of them being larger and more prominent than others.

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

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

1000.00

89500.00

	21b		22		23		24		25		26
	27	X	28a		28b		28c		29		30b

Medtronic Inc. PAC

Age Group	Percentage
18-24	10
25-34	15
35-44	20
45-54	25
55-64	30
65-74	35
75-84	40
85+	0.06