

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 Washington DC 20004

2. FEC IDENTIFICATION NUMBER C C00311878 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

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) [X] Mar 20 (M3) Apr 20 (M4) May 20 (M5) Jun 20 (M6) Jul 20 (M7) Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on in the State of

5. Covering Period 01 / 01 / 2018 through 01 / 31 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Parkhill, Karen, , , Type or Print Name of Treasurer

Signature of Treasurer Parkhill, Karen, , , [Electronically Filed] Date 02 / 16 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Medtronic Inc. PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		328234.02
(b) Cash on Hand at Beginning of Reporting Period.....	328234.02	
(c) Total Receipts (from Line 19)	20553.94	20553.94
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	348787.96	348787.96
7. Total Disbursements (from Line 31).....	42500.00	42500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	306287.96	306287.96
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Medtronic Inc. PAC

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

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).....	2730.01	2730.01
(ii) Unitemized	17823.93	17823.93
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	20553.94	20553.94
(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)	20553.94	20553.94
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)).....▶	20553.94	20553.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	20553.94	20553.94

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	42500.00	42500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	42500.00	42500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	42500.00	42500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	20553.94	20553.94
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20553.94	20553.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 6 OF 15
<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

A. Brown, Patrick, E, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 Medtronic Parkway NE

City Minneapolis	State MN	Zip Code 55432
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Medtronic Inc.	Occupation (for Individual) VP Sales Area CVG
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.72

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	26	/	2018

Transaction ID : A2018-101381

Amount of Each Receipt this Period
142.86

Memo Item

B. Clark, Robert, E, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 Medtronic Parkway NE

City Minneapolis	State MN	Zip Code 55432
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Medtronic Inc.	Occupation (for Individual) VP Gbl Comm
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	26	/	2018

Transaction ID : A2018-101406

Amount of Each Receipt this Period
135.00

Memo Item

C. Courtney, William, B, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 Medtronic Parkway NE

City Minneapolis	State MN	Zip Code 55432
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Medtronic Inc.	Occupation (for Individual) VP MDT Bus Servs
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	26	/	2018

Transaction ID : A2018-101604

Amount of Each Receipt this Period
135.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	412.86
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 7 OF 15
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Coyle, Michael, J, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 Medtronic Parkway NE

City Minneapolis	State MN	Zip Code 55432
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Medtronic Inc.	Occupation (for Individual) EVP/Group President CVG
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
384.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		26		2018

Transaction ID : A2018-101352

Amount of Each Receipt this Period
192.00

Memo Item

B. Fairchild, Kenneth, W, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 Medtronic Parkway NE

City Minneapolis	State MN	Zip Code 55432
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Medtronic Inc.	Occupation (for Individual) VP Gbl Rewards
---	---

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
01		26		2018

Transaction ID : A2018-101291

Amount of Each Receipt this Period
150.00

Memo Item

C. Felton, Brian, S, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 Medtronic Parkway NE

City Minneapolis	State MN	Zip Code 55432
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Medtronic Inc.	Occupation (for Individual) VP/Chief Couns DIA
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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
01		26		2018

Transaction ID : A2018-101619

Amount of Each Receipt this Period
120.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	462.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Genau, Michael, C, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Medtronic Inc. Occupation (for Individual) SVP/President AMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.00

Date of Receipt 01 / 26 / 2018
Transaction ID : A2018-101354
 Amount of Each Receipt this Period 192.00
 Memo Item

B. Hakami, Hooman, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Medtronic Inc. Occupation (for Individual) EVP/Group President DIA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.30

Date of Receipt 01 / 26 / 2018
Transaction ID : A2018-101552
 Amount of Each Receipt this Period 185.15
 Memo Item

C. Lerman, Bradley, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Medtronic Inc. Occupation (for Individual) SVP Genl Couns/Corp Sec
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 384.00

Date of Receipt 01 / 26 / 2018
Transaction ID : A2018-101613
 Amount of Each Receipt this Period 192.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	569.15
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 9 OF 15
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mann, Brek, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Medtronic Inc. Occupation (for Individual) VP National Sales Diagnostics
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 26 / 2018
Transaction ID : A2018-101616
 Amount of Each Receipt this Period 150.00
 Memo Item

B. Martha, Geoffrey, S, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Medtronic Inc. Occupation (for Individual) EVP/Group President RTG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.00

Date of Receipt 01 / 26 / 2018
Transaction ID : A2018-101537
 Amount of Each Receipt this Period 192.00
 Memo Item

C. Pisanelli, Kristina, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Medtronic Inc. Occupation (for Individual) VP GA AMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 364.00

Date of Receipt 01 / 26 / 2018
Transaction ID : A2018-101302
 Amount of Each Receipt this Period 182.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	524.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 15
<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

A. Roberts, David, H, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 Medtronic Parkway NE

City Minneapolis	State MN	Zip Code 55432
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Medtronic Inc.	Occupation (for Individual) VP AMER CVG
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	26	/	2018

Transaction ID : A2018-101493

Amount of Each Receipt this Period
135.00

Memo Item

B. Schaber, Daniel, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 Medtronic Parkway NE

City Minneapolis	State MN	Zip Code 55432
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Medtronic Inc.	Occupation (for Individual) VP Clin Research HF
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	26	/	2018

Transaction ID : A2018-101484

Amount of Each Receipt this Period
135.00

Memo Item

C. Steinhaus, David, M, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 Medtronic Parkway NE

City Minneapolis	State MN	Zip Code 55432
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Medtronic Inc.	Occupation (for Individual) VP/GM Heart Failure
---	--

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
01	/	26	/	2018

Transaction ID : A2018-101495

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	420.00
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 11 OF 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Weiss, Lawrence, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Medtronic Inc. Occupation (for Individual) VP Legal MITG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2018
Transaction ID : A2018-101312
 Amount of Each Receipt this Period
 150.00
 Memo Item

B. White, Robert, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Medtronic Inc. Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2018
Transaction ID : A2018-101611
 Amount of Each Receipt this Period
 192.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	342.00
TOTAL This Period (last page this line number only).....▶	2730.01

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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

A. ADVAMED PAC

Full Name (Last, First, Middle Initial)

Mailing Address 701 Pennsylvania Ave. NW Suite 800

City Washington State DC Zip Code 20004

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) Not Applicable

State: District:

Date of Disbursement: 01 / 31 / 2018

FEC Identification Number: C00340356

Transaction ID : B679749

Amount of Each Disbursement this Period: 5000.00

Memo Item

B. Himes for Congress

Full Name (Last, First, Middle Initial)

Mailing Address 415 New Jersey Ave. SE #1

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

Candidate Name Himes, Jim, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) Convention

State: CT District: 04

Date of Disbursement: 01 / 31 / 2018

FEC Identification Number: C00434191

Transaction ID : B679733

Amount of Each Disbursement this Period: 2000.00

Memo Item

C. House Conservatives Fund

Full Name (Last, First, Middle Initial)

Mailing Address 228 S. Washington St. Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) Not Applicable

State: District:

Date of Disbursement: 01 / 31 / 2018

FEC Identification Number: C00326439

Transaction ID : B679747

Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....	12000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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

A. Kustoff for Congress

Full Name (Last, First, Middle Initial)

Mailing Address 499 S. Capitol St. SW Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

Candidate Name
Kustoff, David, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: TN District: 08

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2018

FEC Identification Number

C C00614826

Transaction ID : **B679732**

Amount of Each Disbursement this Period

1000.00

Memo Item

B. Majority Committee PAC--MC PAC

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 10134

City Bakersfield State CA Zip Code 93389

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) Not Applicable
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2018

FEC Identification Number

C C00428052

Transaction ID : **B679750**

Amount of Each Disbursement this Period

5000.00

Memo Item

C. Moderate Democrats PAC

Full Name (Last, First, Middle Initial)

Mailing Address 303 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) Not Applicable
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2018

FEC Identification Number

C C00436022

Transaction ID : **B679746**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

11000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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

A. Moulton for Congress Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 415 New Jersey Ave. SE #1

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		3	1		2	0	1	8		

City Washington State DC Zip Code 20003

FEC Identification Number

Purpose of Disbursement Contribution

C	C00547240
---	-----------

Candidate Name

Transaction ID : B679734

Moulton, Seth, , ,

Amount of Each Disbursement this Period

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

Disbursement For: 2018
 Primary General
 Other (specify) ▼

011
Category/ Type

1500.00

Memo Item

B. New Democrat Coalition PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 700 13th Street NW #600

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		3	1		2	0	1	8		

City Washington State DC Zip Code 20005

FEC Identification Number

Purpose of Disbursement Contribution

C	C00409730
---	-----------

Candidate Name

Transaction ID : B679748

Office Sought: House Senate President
State: District:

Disbursement For: 2018
 Primary General
 Other (specify) Not Applicable

011
Category/ Type

Amount of Each Disbursement this Period

5000.00

Memo Item

C. Perlmutter for Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 415 New Jersey Ave. SE #1

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		3	1		2	0	1	8		

City Washington State DC Zip Code 20003

FEC Identification Number

Purpose of Disbursement Contribution

C	C00410639
---	-----------

Candidate Name

Transaction ID : B679751

Perlmutter, Ed, , ,

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: CO District: 07

Disbursement For: 2018
 Primary General
 Other (specify) ▼

011
Category/ Type

1500.00

Memo Item

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

8000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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. Prosperity Action Inc.		Date of Disbursement MM / DD / YYYY 01 / 31 / 2018
Mailing Address 320 1st Street SE		FEC Identification Number C C00377689 Transaction ID : B679728 Amount of Each Disbursement this Period 5000.00
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Contribution	Category/ Type 011	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Not Applicable
State: District:		

Full Name (Last, First, Middle Initial) B. Republican Main Street Partnership PAC		Date of Disbursement MM / DD / YYYY 01 / 31 / 2018
Mailing Address c/o G&W 2201 Wisconsin Ave NW #320		FEC Identification Number C C00165159 Transaction ID : B679735 Amount of Each Disbursement this Period 5000.00
City Washington	State DC	Zip Code 20007
Purpose of Disbursement Contribution	Category/ Type 011	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Not Applicable
State: District:		

Full Name (Last, First, Middle Initial) C. Walden for Congress		Date of Disbursement MM / DD / YYYY 01 / 31 / 2018
Mailing Address 213 Ashby Street		FEC Identification Number C C00333427 Transaction ID : B679752 Amount of Each Disbursement this Period 1500.00
City Alexandria	State DC	Zip Code 22305
Purpose of Disbursement Contribution	Category/ Type 011	
Candidate Name Walden, Gregory Paul, , ,	Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OR District: 02		

SUBTOTAL of Disbursements This Page (optional).....▶	11500.00
TOTAL This Period (last page this line number only).....▶	42500.00