

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ABIOMED INC POLITICAL ACTION COMMITTEE (ABIOMED 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="2016"/>	<input type="text" value="299572.89"/>	<input type="text" value="299572.89"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="299572.89"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="299572.89"/>	<input type="text" value="299572.89"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="25033.00"/>	<input type="text" value="25033.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="274539.89"/>	<input type="text" value="274539.89"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

ABIOMED INC POLITICAL ACTION COMMITTEE (ABIOMED PAC)

Report Covering the Period: From: 10 / 01 / 2016 To: 10 / 19 / 2016

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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
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)).....▶	0.00	0.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	0.00

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.....	25000.00	25000.00
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).....	33.00	33.00
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)) ..	25033.00	25033.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25033.00	25033.00

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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
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 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

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)
ABIOMED INC POLITICAL ACTION COMMITTEE (ABIOMED PAC)

Full Name (Last, First, Middle Initial) A. BURGESS, MICHAEL C. DR.		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address PO BOX 2334		FEC Identification Number C C00372532 Transaction ID : SB23.5443
City DENTON	State TX	Zip Code 76202
Purpose of Disbursement Political Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: TX District: 26	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. COLLINS FOR SENATOR		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address PO BOX 1096		FEC Identification Number C C00314575 Transaction ID : SB23.5435
City BANGOR	State ME	Zip Code 04402
Purpose of Disbursement Political Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: ME District: 00	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. FRIENDS OF ERIK PAULSEN		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address P.O. BOX 44369 250 PRAIRIE CENTER DRIVE		FEC Identification Number C C00439661 Transaction ID : SB23.5446
City EDEN PRAIRIE	State MN	Zip Code 55344
Purpose of Disbursement Political Contribution	Category/ Type 011	Amount of Each Disbursement this Period 2000.00
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: MN District: 03	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

4000.00

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)
ABIOMED INC POLITICAL ACTION COMMITTEE (ABIOMED PAC)

A. FRIENDS OF JOE HECK

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 753908

City LAS VEGAS State NV Zip Code 89136

Purpose of Disbursement Political Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: NV District: 00

Date of Disbursement: 10 / 11 / 2016

FEC Identification Number: C00580688
Transaction ID : SB23.5439

Amount of Each Disbursement this Period: 2000.00

Memo Item

B. FRIENDS OF KELLY AYOTTE INC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 937

City MANCHESTER State NH Zip Code 03105

Purpose of Disbursement Political Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: NH District: 00

Date of Disbursement: 10 / 11 / 2016

FEC Identification Number: C00464297
Transaction ID : SB23.5433

Amount of Each Disbursement this Period: 2000.00

Memo Item

C. JOE KENNEDY FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 590464

City NEWTON State MA Zip Code 02459

Purpose of Disbursement Political Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: MA District: 04

Date of Disbursement: 10 / 11 / 2016

FEC Identification Number: C00512970
Transaction ID : SB23.5450

Amount of Each Disbursement this Period: 1000.00

Memo Item

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

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

5000.00

**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)

ABIOMED INC POLITICAL ACTION COMMITTEE (ABIOMED PAC)

Full Name (Last, First, Middle Initial)

A. KLOBUCHAR FOR MINNESOTA

Mailing Address PO BOX 4146

City
ST PAUL

State
MN

Zip Code
55104

Purpose of Disbursement
Political Contribution

011

Category/
Type

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify) ▼

State: MN District: 00

Date of Disbursement

MM / DD / YYYY
10 / 11 / 2016

FEC Identification Number

C C00431353

Transaction ID : SB23.5437

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MARKEY COMMITTEE; THE

Mailing Address PO BOX 120029

City
BOSTON

State
MA

Zip Code
02112

Purpose of Disbursement
Political Contribution

011

Category/
Type

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify)

State: MA District: 00

Date of Disbursement

MM / DD / YYYY
10 / 11 / 2016

FEC Identification Number

C C00196774

Transaction ID : SB23.5441

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MASSACHUSETTS REPUBLICAN PARTY

Mailing Address 85 MERRIMAC ST.
SUITE 400

City
BOSTON

State
MA

Zip Code
02114

Purpose of Disbursement
Political Contribution

011

Category/
Type

Candidate Name

MASSACHUSETTS VICTORY COMMITTEE

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2016

FEC Identification Number

C C00549782

Transaction ID : SB23.5419

Amount of Each Disbursement this Period

5000.00

Memo Item

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

9000.00

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)
ABIOMED INC POLITICAL ACTION COMMITTEE (ABIOMED PAC)

Full Name (Last, First, Middle Initial) A. MOULTON, SETH		Date of Disbursement MM / DD / YYYY 10 / 06 / 2016
Mailing Address PO BOX 2013		FEC Identification Number C00547240 Transaction ID : SB23.5426
City SALEM	State MA	Zip Code 09170
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MA	District: 06	

Full Name (Last, First, Middle Initial) B. NEAL, RICHARD E MR.		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address 36 ATWATER TERRACE		FEC Identification Number C00226522 Transaction ID : SB23.5452
City SPRINGFIELD	State MA	Zip Code 01107
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MA	District: 01	

Full Name (Last, First, Middle Initial) C. VOLUNTEERS FOR SHIMKUS		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address PO BOX 661		FEC Identification Number C00258855 Transaction ID : SB23.5448
City COLLINSVILLE	State IL	Zip Code 62234
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 15	

SUBTOTAL of Disbursements This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	25000.00