

# 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 ▲

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:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day **PRE**-Election Report for the:
- |   |   |                                       |
|---|---|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input checked="" type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S)            |                                       |

Election on 11 / 04 / 2014 in the State of DC

- (d) 30-Day **POST**-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period

10 / 01 / 2014 through 10 / 15 / 2014

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

10 / 22 / 2014

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

**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:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		84748.59
(b) Cash on Hand at Beginning of Reporting Period.....	93476.81	
(c) Total Receipts (from Line 19) .....	8652.18	186794.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	102128.99	271542.89
7. Total Disbursements (from Line 31).....	23500.00	192913.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	78628.99	78628.99
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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).....	8069.49	138715.81
(ii) Unitemized .....	582.69	48078.49
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	8652.18	186794.30
(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) .....	8652.18	186794.30
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))..... ▶	8652.18	186794.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	8652.18	186794.30

**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	22913.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	22913.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	23500.00	170000.00
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 .....	0.00	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 .....	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)) ..	23500.00	192913.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23500.00	192913.90

**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) .....	8652.18	186794.30
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8652.18	186794.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	22913.90
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	22913.90

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 69
	(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

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. Mr. Philip J Albert**  
Full Name (Last, First, Middle Initial)  
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 Corporate Tax  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354351**  
Amount of Each Receipt this Period **100.00**

**B. Mr. Ross A Allen**  
Full Name (Last, First, Middle Initial)  
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 VP Finance Spinal  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **1680.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354355**  
Amount of Each Receipt this Period **80.00**

**C. Mr. Brian D Anderson**  
Full Name (Last, First, Middle Initial)  
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 Prog Mgr  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354438**  
Amount of Each Receipt this Period **10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **100.00**  
**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 7 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Ms. Sarah A Audet**  
 Full Name (Last, First, Middle Initial)  
 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 Program Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 273.00

Date of Receipt  
 10 / 10 / 2014  
**Transaction ID : A2014-2354361**  
 Amount of Each Receipt this Period  
 13.00

**B. Mr. Neil P Ayotte**  
 Full Name (Last, First, Middle Initial)  
 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 ▼ 2625.00

Date of Receipt  
 10 / 10 / 2014  
**Transaction ID : A2014-2354451**  
 Amount of Each Receipt this Period  
 125.00

**C. Robbie E Bakeberg**  
 Full Name (Last, First, Middle Initial)  
 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 Technical Svc Spec  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 10 / 10 / 2014  
**Transaction ID : A2014-2354581**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 148.00  
**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 8 OF 69
	(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**

Full Name (Last, First, Middle Initial) <b>A. Ms. Jessica E Battaglia</b>		Date of Receipt
Mailing Address 950 F St NW Ste 500		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20004-1478
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : A2014-2354513</b>
Name of Employer Medtronic Inc.	Occupation Govt Affairs Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="40.00"/>
	<input type="text" value="840.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Ms. Mary P Bauman</b>		Date of Receipt
Mailing Address 7000 Central Ave NE PO Box 1350		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Minneapolis	State MN	Zip Code 55432-3568
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : A2014-2354561</b>
Name of Employer Medtronic Inc.	Occupation Sr Patent Dir	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
	<input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Mr. Jonathan S Berry</b>		Date of Receipt
Mailing Address 1800 Pyramid Pl Bldg C		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Memphis	State TN	Zip Code 38132-1703
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : A2014-2354360</b>
Name of Employer Medtronic Inc.	Occupation VP HR Spinal	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="30.00"/>
	<input type="text" value="630.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="80.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>



**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 9 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Timothy C Berry**  
Full Name (Last, First, Middle Initial)

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	Occupation
Medtronic Inc.	Physician Relations Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **252.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

**Transaction ID : A2014-2354409**

Amount of Each Receipt this Period  

98.00
-------

**12.00**

**B. Dale F Beumer**  
Full Name (Last, First, Middle Initial)

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 Finance Cardiology Group

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1596.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

**Transaction ID : A2014-2354606**

Amount of Each Receipt this Period  

76.00
-------

**C. Mr. Walter R Blackwell**  
Full Name (Last, First, Middle Initial)

Mailing Address 4620 N Beach St

City	State	Zip Code
Haltom City	TX	76137-3219

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Medtronic Inc.	Prin Manufacturing Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

**Transaction ID : A2014-2354474**

Amount of Each Receipt this Period  

10.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>98.00</b>
<b>TOTAL</b> 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 69
	(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. Mr. Frank L Blanchard**  
 Full Name (Last, First, Middle Initial)  
 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 Occupation  
 Medtronic Inc. Sr District Manager SHD  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 273.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354440**  
 Amount of Each Receipt this Period  
 13.00

**B. Ms. Christine M Blanchette**  
 Full Name (Last, First, Middle Initial)  
 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 Phased RF AF Solutions  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354602**  
 Amount of Each Receipt this Period  
 10.00

**C. Mr. Michael Bolen**  
 Full Name (Last, First, Middle Initial)  
 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 Occupation  
 Medtronic Inc. Govt Affairs Strategist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 840.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354616**  
 Amount of Each Receipt this Period  
 40.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	63.00
<b>TOTAL</b> 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 11 OF 69
	<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. Mr. Mike Bordonaro**  
 Full Name (Last, First, Middle Initial)  
 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 Sr Prin Manufacturing Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354508**  
 Amount of Each Receipt this Period  
 100.00

**B. Mr. Patrick E Brown**  
 Full Name (Last, First, Middle Initial)  
 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 Area Sales CVG  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.06

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354579**  
 Amount of Each Receipt this Period  
 142.86

**C. Mr. David J Buendorf**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6800 Shingle Creek Pkwy  
 City Brooklyn Center State MN Zip Code 55430-1445  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Medtronic Inc. Occupation Sr Prin Manufacturing Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354469**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	162.86
<b>TOTAL</b> 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 12 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. John E Burnes**  
Full Name (Last, First, Middle Initial)

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 Program Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 282.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354591**

Amount of Each Receipt this Period  
 13.46

**B. Mr. Jeffrey M Burrows**  
Full Name (Last, First, Middle Initial)

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 Program Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354338**

Amount of Each Receipt this Period  
 15.00

**C. Mr. Kevin M Callahan**  
Full Name (Last, First, Middle Initial)

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 ▼ 403.83

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354383**

Amount of Each Receipt this Period  
 19.23

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 47.69

**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 13 OF 69
	(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"/> 15
	<input type="checkbox"/> 12	<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) <b>A. Mr. Thomas A Carls</b>		Date of Receipt
Mailing Address 1800 Pyramid Pl Bldg A		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Memphis	TN	38132-1703
FEC ID number of contributing federal political committee.		Transaction ID : <b>A2014-2354334</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000"/>
Name of Employer	Occupation	
Medtronic Inc.	VP Product Development Spinal	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Robert G Carson</b>		Date of Receipt
Mailing Address 1800 Pyramid Pl Bldg D		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Memphis	TN	38132-1703
FEC ID number of contributing federal political committee.		Transaction ID : <b>A2014-2354522</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="800"/>
Name of Employer	Occupation	
Medtronic Inc.	VP Marketing Complex Spine	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1680.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ms. Mary Centoni</b>		Date of Receipt
Mailing Address 3540 Unocal Pl		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Santa Rosa	CA	95403-1774
FEC ID number of contributing federal political committee.		Transaction ID : <b>A2014-2354321</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Medtronic Inc.	Sr Tax Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="525.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="115.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 14 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Carey R Chastain**  
Full Name (Last, First, Middle Initial)

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	Occupation
Medtronic Inc.	District Sales Mgr II CRDM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **252.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2014

**Transaction ID : A2014-2354388**

Amount of Each Receipt this Period  

40.00	12.00
-------	-------

**B. Mr. Brent P Chelgren**  
Full Name (Last, First, Middle Initial)

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.	Sr Program Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2014

**Transaction ID : A2014-2354347**

Amount of Each Receipt this Period  

15.00
-------

**C. Mr. Steven R Christenson**  
Full Name (Last, First, Middle Initial)

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	Occupation
Medtronic Inc.	Engineering Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **273.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2014

**Transaction ID : A2014-2354371**

Amount of Each Receipt this Period  

13.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>40.00</b>
<b>TOTAL</b> 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 15 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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**

Full Name (Last, First, Middle Initial) <b>A. Ms. Mary Christopher</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354625</b>
Mailing Address 950 F St NW Ste 500		Amount of Each Receipt this Period 10.00
City Washington	State DC	Zip Code 20004-1478
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation Sr LDRP Mktg/BD/Crp Dv Assoc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Robert E Clark</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354318</b>
Mailing Address 710 Medtronic Pkwy		Amount of Each Receipt this Period 100.00
City Minneapolis	State MN	Zip Code 55432-5603
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation VP Corporate Communications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Scott F Clugston</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354344</b>
Mailing Address 710 Medtronic Pkwy		Amount of Each Receipt this Period 10.00
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 Systems Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	120.00
<b>TOTAL</b> 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 69
	(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. Ms. Alexandra T Clyde**  
 Full Name (Last, First, Middle Initial)  
 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 ▼ 749.91

Date of Receipt 10 / 10 / 2014  
**Transaction ID : A2014-2354536**  
 Amount of Each Receipt this Period 35.71

**B. Mr. Jason D Clyde**  
 Full Name (Last, First, Middle Initial)  
 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 Prin Tech Field Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 10 / 2014  
**Transaction ID : A2014-2354553**  
 Amount of Each Receipt this Period 10.00

**C. Mr. Andrew S Davis**  
 Full Name (Last, First, Middle Initial)  
 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 Regional Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 10 / 2014  
**Transaction ID : A2014-2354427**  
 Amount of Each Receipt this Period 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 55.71  
**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 17 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Gerardo De La Concha**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1851 E Deere Ave  
 City Santa Ana State CA Zip Code 92705-5720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Medtronic Inc. Occupation VP Operations Mexico  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **315.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354339**  
 Amount of Each Receipt this Period  
**15.00**

**B. Mr. Douglas W DeLeeuw**  
 Full Name (Last, First, Middle Initial)  
 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 HROC Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **315.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354365**  
 Amount of Each Receipt this Period  
**15.00**

**C. Mr. Charles L Dennis II**  
 Full Name (Last, First, Middle Initial)  
 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 ▼ **2835.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354335**  
 Amount of Each Receipt this Period  
**135.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>165.00</b>
<b>TOTAL</b> 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 18 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Craig L Drager**  
Full Name (Last, First, Middle Initial)

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 R/D and ProjMgmt Surg Tech

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 10 / 10 / 2014  
**Transaction ID : A2014-2354331**

Amount of Each Receipt this Period 100.00

**B. Mr. Gary L Ellis**  
Full Name (Last, First, Middle Initial)

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 ▼ 4032.00

Date of Receipt 10 / 10 / 2014  
**Transaction ID : A2014-2354357**

Amount of Each Receipt this Period 192.00

**C. Mr. Thomas B Emms**  
Full Name (Last, First, Middle Initial)

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 Regional Sales Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 10 / 2014  
**Transaction ID : A2014-2354476**

Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 317.00

**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 19 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Gregory Englehardt**  
 Full Name (Last, First, Middle Initial)  
 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 Occupation  
 Medtronic Inc. Regional Sales Manager  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354615**  
 Amount of Each Receipt this Period  
 25.00

**B. Mr. Kenneth W Fairchild**  
 Full Name (Last, First, Middle Initial)  
 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 Occupation  
 Medtronic Inc. VP Global Rewards  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 825.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354330**  
 Amount of Each Receipt this Period  
 25.00

**C. Mr. Jeffrey A Farkas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 950 F St NW  
 Ste 500  
 City State Zip Code  
 Washington DC 20004-1478  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Medtronic Inc. VP US Federal Reimbursement  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1617.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354326**  
 Amount of Each Receipt this Period  
 77.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 127.00  
**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 20 OF 69  
(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. Brian S Felton**

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 Occupation  
Medtronic Inc. VP and Chief Counsel Neuro

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2520.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 10 / 2014  
**Transaction ID : A2014-2354564**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**B. Mr. Andreas Fenner**

Mailing Address 2343 W Medtronic Way

City State Zip Code  
Tempe AZ 85281-5133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Medtronic Inc. Sr Prin Product Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 10 / 2014  
**Transaction ID : A2014-2354411**

Amount of Each Receipt this Period  
10.00

Full Name (Last, First, Middle Initial)  
**C. Mr. Myron L Finseth**

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. Prin Technical Writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 10 / 2014  
**Transaction ID : A2014-2354610**

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 140.00

**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 21 OF 69
	(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. Ms. Christine H Fitzgerald**  
 Full Name (Last, First, Middle Initial)  
 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 Occupation  
 Medtronic Inc. Sr Prin Program/Proj Analyst  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354585**  
 Amount of Each Receipt this Period  
 20.00

**B. Mr. Mark Fletcher**  
 Full Name (Last, First, Middle Initial)  
 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 Occupation  
 Medtronic Inc. SVP and President Surg Tech  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1596.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354336**  
 Amount of Each Receipt this Period  
 76.00

**C. Ms. Ann H Fogerson**  
 Full Name (Last, First, Middle Initial)  
 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. Sr HR Director  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1680.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354377**  
 Amount of Each Receipt this Period  
 80.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	176.00
<b>TOTAL</b> 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 22 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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) <b>A. Ms. Suzanne M Foster</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354626</b>
Mailing Address 180 International Dr		Amount of Each Receipt this Period 80.00
City Portsmouth	State NH	Zip Code 03801-6837
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation VP/GM Advanced Energy ST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1680.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. John L Foust</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354575</b>
Mailing Address 710 Medtronic Parkway NE		Amount of Each Receipt this Period 50.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Paul A Franson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354385</b>
Mailing Address 8200 Coral Sea St NE		Amount of Each Receipt this Period 10.00
City Mounds View	State MN	Zip Code 55112-4391
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation IT Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140.00
<b>TOTAL</b> 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 23 OF 69
	(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

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) <b>A. Mr. Robert J Fredericks</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354532</b>
Mailing Address 1800 Pyramid Pl Bldg C		Amount of Each Receipt this Period 88.00
City Memphis	State TN	
Zip Code 38132-1703		Amount of Each Receipt this Period 1050.00
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation VP Strat/Innov/GblMktg Spinal	Amount of Each Receipt this Period 525.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>B. Ms. Ellen E Frenkel</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354448</b>
Mailing Address 7000 Central Ave NE PO Box 1350		Amount of Each Receipt this Period 25.00
City Minneapolis	State MN	
Zip Code 55432-3568		Amount of Each Receipt this Period 13.00
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation VP Sales DBS	Amount of Each Receipt this Period 273.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C. Ms. Patricia K Fuher</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354367</b>
Mailing Address 8200 Coral Sea St NE		Amount of Each Receipt this Period 88.00
City Mounds View	State MN	
Zip Code 55112-4391		Amount of Each Receipt this Period 273.00
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation VP Product Devel AF Solutions	Amount of Each Receipt this Period 88.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	88.00
<b>TOTAL</b> 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 24 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Robert A Gabler**  
Full Name (Last, First, Middle Initial)

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 Strategic Planning Dir

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **273.00**

Date of Receipt **10 / 10 / 2014**

**Transaction ID : A2014-2354600**

Amount of Each Receipt this Period **13.00**

**B. Ms. Kellie A Gallagher**  
Full Name (Last, First, Middle Initial)

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 Quality Systems Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 10 / 2014**

**Transaction ID : A2014-2354397**

Amount of Each Receipt this Period **10.00**

**C. Mr. David J Gamgort**  
Full Name (Last, First, Middle Initial)

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 National SalesCRDM AF

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1680.00**

Date of Receipt **10 / 10 / 2014**

**Transaction ID : A2014-2354346**

Amount of Each Receipt this Period **80.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **103.00**

**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 25 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Roland T Garey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8000 Regency Pkwy  
 Ste 260  
 City Cary State NC Zip Code 27518-8590  
 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 **1050.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354547**  
 Amount of Each Receipt this Period  
**50.00**

**B. Mr. Christopher G Garland**  
 Full Name (Last, First, Middle Initial)  
 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 **2625.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354535**  
 Amount of Each Receipt this Period  
**125.00**

**C. Ms. Marie A Garnes**  
 Full Name (Last, First, Middle Initial)  
 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 Sr Program Dir  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354516**  
 Amount of Each Receipt this Period  
**10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **185.00**  
**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 26 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Ms. Rosa M Garza**  
Full Name (Last, First, Middle Initial)

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 Prin Govt Affairs Spec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 10 / 2014  
**Transaction ID : A2014-2354488**

Amount of Each Receipt this Period  
10.00

**B. Mr. Michael C Genau**  
Full Name (Last, First, Middle Initial)

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 ▼  
4032.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 10 / 2014  
**Transaction ID : A2014-2354623**

Amount of Each Receipt this Period  
192.00

**C. Mr. Martin T Gerber**  
Full Name (Last, First, Middle Initial)

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 Engineering Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 10 / 2014  
**Transaction ID : A2014-2354592**

Amount of Each Receipt this Period  
10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	212.00
<b>TOTAL</b> 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 27 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. John S Germanson**  
Full Name (Last, First, Middle Initial)

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 Prog Dir

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 10 / 2014**

**Transaction ID : A2014-2354354**

Amount of Each Receipt this Period **100.00**

**B. Mr. Michael J Gill**  
Full Name (Last, First, Middle Initial)

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 ▼ **2100.00**

Date of Receipt **10 / 10 / 2014**

**Transaction ID : A2014-2354524**

Amount of Each Receipt this Period **100.00**

**C. Ms. Nina B Goodheart**  
Full Name (Last, First, Middle Initial)

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 ▼ **378.00**

Date of Receipt **10 / 10 / 2014**

**Transaction ID : A2014-2354572**

Amount of Each Receipt this Period **18.00**

**SUBTOTAL** of Receipts This Page (optional)..... **128.00**

**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 28 OF 69
	(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. Mr. Daniel D Greenfield**  
 Full Name (Last, First, Middle Initial)  
 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 Finance Director  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354432**  
 Amount of Each Receipt this Period **100.00**

**B. Ms. Regina E Groves**  
 Full Name (Last, First, Middle Initial)  
 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 **1050.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354341**  
 Amount of Each Receipt this Period **50.00**

**C. Ms. Rita A Guzzetta**  
 Full Name (Last, First, Middle Initial)  
 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 **525.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354580**  
 Amount of Each Receipt this Period **25.00**

**SUBTOTAL** of Receipts This Page (optional)..... **85.00**  
**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 29 OF 69
	<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. Christian R Hadland**  
 Full Name (Last, First, Middle Initial)  
 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 Quality CVG  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2100.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354324**  
 Amount of Each Receipt this Period **100.00**

**B. Ms. Kathleen M Hagen**  
 Full Name (Last, First, Middle Initial)  
 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 **210.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354620**  
 Amount of Each Receipt this Period **10.00**

**C. Mr. Michael A Hagenson**  
 Full Name (Last, First, Middle Initial)  
 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 Govt Affairs Spec  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354562**  
 Amount of Each Receipt this Period **10.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>120.00</b>
<b>TOTAL</b> 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 30 OF 69  
(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**

**A. Ms. Elizabeth N Hammack**  
Full Name (Last, First, Middle Initial)  
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 **945.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354329**  
Amount of Each Receipt this Period **45.00**

**B. Mr. John W Hammargren**  
Full Name (Last, First, Middle Initial)  
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 Program Dir  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **273.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354349**  
Amount of Each Receipt this Period **13.00**

**C. Mr. John C Hanson**  
Full Name (Last, First, Middle Initial)  
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 Strategic Sourcing Dir  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **252.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354379**  
Amount of Each Receipt this Period **12.00**

**SUBTOTAL** of Receipts This Page (optional)..... **70.00**  
**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 31 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. David Harris Jr.**  
Full Name (Last, First, Middle Initial)

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	Occupation
Medtronic Inc.	Coronary District Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2014

**Transaction ID : A2014-2354498**

Amount of Each Receipt this Period  

420.00
--------

**B. Ms. Kathleen A Herzog**  
Full Name (Last, First, Middle Initial)

Mailing Address 7000 Central Ave NE

City	State	Zip Code
Minneapolis	MN	55432-3568

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Medtronic Inc.	Sr Quality/Reg Aff Prog Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2014

**Transaction ID : A2014-2354319**

Amount of Each Receipt this Period  

15.00
-------

**C. Mr. Michael F Hess**  
Full Name (Last, First, Middle Initial)

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 Research/Dev Brady

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **273.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2014

**Transaction ID : A2014-2354590**

Amount of Each Receipt this Period  

13.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>48.00</b>
<b>TOTAL</b> 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 32 OF 69
	(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. Mr. Doug Hoekstra**  
 Full Name (Last, First, Middle Initial)  
 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 ▼ 1050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354348**  
 Amount of Each Receipt this Period  
 50.00

**B. Mr. James T Hogan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3750 NW 87th Ave Ste 700  
 City Doral State FL Zip Code 33178-2434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Medtronic Inc. Occupation VP and President LATAM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354528**  
 Amount of Each Receipt this Period  
 10.00

**C. Mr. William B Holmes**  
 Full Name (Last, First, Middle Initial)  
 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 Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354546**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 160.00  
**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 33 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Mr. Andrew W Horstman**  
 Full Name (Last, First, Middle Initial)  
 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 **1050.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354422**  
 Amount of Each Receipt this Period  
**50.00**

**B. Mr. Michael D Hosea**  
 Full Name (Last, First, Middle Initial)  
 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 Regional Sales Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **282.66**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354473**  
 Amount of Each Receipt this Period  
**13.46**

**C. Mr. Jeffrey S Hubauer**  
 Full Name (Last, First, Middle Initial)  
 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 **630.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354342**  
 Amount of Each Receipt this Period  
**30.00**

**SUBTOTAL** of Receipts This Page (optional)..... **93.46**  
**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	FOR LINE NUMBER: (check only one)	PAGE 34 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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**

Full Name (Last, First, Middle Initial) <b>A. Ms. Joan D Humes</b>		Date of Receipt
Mailing Address 710 Medtronic Pkwy		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Minneapolis	MN	55432-5603
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : A2014-2354627</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Medtronic Inc.	VP Deputy GCounsel Litigation	<input type="text" value="80.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1680.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Mr. Michael J Jaro</b>		Date of Receipt
Mailing Address 710 Medtronic Pkwy		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Minneapolis	MN	55432-5603
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : A2014-2354425</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Medtronic Inc.	VP and Chief IP Counsel	<input type="text" value="75.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1575.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Mr. Darrell E Johnson</b>		Date of Receipt
Mailing Address 8200 Coral Sea St NE		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Mounds View	MN	55112-4391
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : A2014-2354573</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Medtronic Inc.	VP/GM Connected Care and Mktg	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="420.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="175.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 35 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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**

Full Name (Last, First, Middle Initial)  
**A. Mr. Patrick M Joyce**

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 IT Quality Reg Clinical

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **840.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 10 / 2014**

**Transaction ID : A2014-2354526**

Amount of Each Receipt this Period  
**40.00**

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 ▼ **1050.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 10 / 2014**

**Transaction ID : A2014-2354527**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. Mr. Christopher King**

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 Business/Dev/Strategy CRDM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **273.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 10 / 2014**

**Transaction ID : A2014-2354345**

Amount of Each Receipt this Period  
**13.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **103.00**

**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 36 OF 69  
(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. Ms. Denise K King**  
 Full Name (Last, First, Middle Initial)  
 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 Occupation  
 Medtronic Inc. US Benefits Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354530**  
 Amount of Each Receipt this Period  
 20.00

**B. Mr. Douglas J King**  
 Full Name (Last, First, Middle Initial)  
 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 Occupation  
 Medtronic Inc. SVP and President Spinal  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354506**  
 Amount of Each Receipt this Period  
 25.00

**C. Mr. Charles M Kolb**  
 Full Name (Last, First, Middle Initial)  
 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 Commercial Operations SHD  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 807.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354501**  
 Amount of Each Receipt this Period  
 38.46

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 83.46  
**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	FOR LINE NUMBER:	PAGE 37 OF 69
	(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**

Full Name (Last, First, Middle Initial) <b>A. Mr. Christopher G Landon</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354420</b>
Mailing Address 1800 Pyramid Pl Bldg C		Amount of Each Receipt this Period 80.00
City Memphis	State TN	Zip Code 38132-1703
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation VP Market Degenerative Spine	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1680.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Timothy G Laske</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354352</b>
Mailing Address 8200 Coral Sea St NE		Amount of Each Receipt this Period 19.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 399.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Mark S Lent</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354391</b>
Mailing Address 7000 Central Ave NE PO Box 1350		Amount of Each Receipt this Period 19.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 399.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	118.00
<b>TOTAL</b> 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 38 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Charles P Lomel**  
Full Name (Last, First, Middle Initial)

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 Corporate Sales Dir MSB
------------------------------------	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **273.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2014

**Transaction ID : A2014-2354450**

Amount of Each Receipt this Period  

48.00	273.00
-------	--------

**13.00**

**B. Mr. John P Lorbiecki**  
Full Name (Last, First, Middle Initial)

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 Finance Director
------------------------------------	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2014

**Transaction ID : A2014-2354407**

Amount of Each Receipt this Period  

48.00	315.00
-------	--------

**15.00**

**C. Ms. Christine E Loth**  
Full Name (Last, First, Middle Initial)

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 ▼ **420.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2014

**Transaction ID : A2014-2354456**

Amount of Each Receipt this Period  

48.00	420.00
-------	--------

**20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>48.00</b>
<b>TOTAL</b> 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 39 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Gary L Lubben**  
Full Name (Last, First, Middle Initial)

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 Physician/Indust RelsCorp

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **840.00**

Date of Receipt **10 / 10 / 2014**

**Transaction ID : A2014-2354628**

Amount of Each Receipt this Period **400.00**

**B. Brek S Mann**  
Full Name (Last, First, Middle Initial)

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 Regional Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **3150.00**

Date of Receipt **10 / 10 / 2014**

**Transaction ID : A2014-2354542**

Amount of Each Receipt this Period **150.00**

**C. Mr. Geoffrey S Martha**  
Full Name (Last, First, Middle Initial)

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 ▼ **4032.00**

Date of Receipt **10 / 10 / 2014**

**Transaction ID : A2014-2354618**

Amount of Each Receipt this Period **192.00**

**SUBTOTAL** of Receipts This Page (optional)..... **382.00**

**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 40 OF 69  
(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. Mr. John J Mastrototaro**  
 Full Name (Last, First, Middle Initial)  
 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 Research/Dev Diabetes  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **315.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354428**  
 Amount of Each Receipt this Period  
**15.00**

**B. Mr. Michael J Mathias**  
 Full Name (Last, First, Middle Initial)  
 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 Regional Sales  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **525.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354554**  
 Amount of Each Receipt this Period  
**25.00**

**C. Mr. Jim McDermid**  
 Full Name (Last, First, Middle Initial)  
 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 **798.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354340**  
 Amount of Each Receipt this Period  
**38.00**

**SUBTOTAL** of Receipts This Page (optional)..... **78.00**  
**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 41 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. John M McDonald**  
Full Name (Last, First, Middle Initial)

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	Occupation
Medtronic Inc.	Sr District Sales Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**10 / 10 / 2014**

**Transaction ID : A2014-2354490**

Amount of Each Receipt this Period  
**200.00**

**B. Francis C McKernan**  
Full Name (Last, First, Middle Initial)

Mailing Address 35 Cherry Hill Dr

City	State	Zip Code
Danvers	MA	01923-2565

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Medtronic Inc.	Sr HR Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**10 / 10 / 2014**

**Transaction ID : A2014-2354364**

Amount of Each Receipt this Period  
**100.00**

**C. Ms. Susan E McKinney**  
Full Name (Last, First, Middle Initial)

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	Occupation
Medtronic Inc.	Prin Sales Rep CRDM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**10 / 10 / 2014**

**Transaction ID : A2014-2354557**

Amount of Each Receipt this Period  
**15.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>45.00</b>
<b>TOTAL</b> 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 42 OF 69
	(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

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) <b>A. Mr. Charles M Meyerson</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354467</b>
Mailing Address 2002 W Medtronic Way		Amount of Each Receipt this Period 33.00
City Tempe	State AZ	Zip Code 85281-5104
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation Sr Prin IC Design Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Michael W Mihalcz</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354386</b>
Mailing Address 710 Medtronic Parkway NE		Amount of Each Receipt this Period 10.00
City Minneapolis	State MN	Zip Code 55432
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation District Sales Mgr II CRDM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>C. Artie C Miller</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354569</b>
Mailing Address 8200 Coral Sea St NE		Amount of Each Receipt this Period 10.00
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 SHD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	33.00
<b>TOTAL</b> 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 43 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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**

Full Name (Last, First, Middle Initial) <b>A. Mr. David F Miller</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354333</b>
Mailing Address 1800 Pyramid Pl Bldg D		Amount of Each Receipt this Period 115.00
City Memphis	State TN	Zip Code 38132-1703
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation VP Medical Societies/Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2415.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Michelle A Miller</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354435</b>
Mailing Address 710 Medtronic Pkwy		Amount of Each Receipt this Period 80.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1680.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Michael S Mitchiner</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354556</b>
Mailing Address 710 Medtronic Parkway NE		Amount of Each Receipt this Period 10.00
City Minneapolis	State MN	Zip Code 55432
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation District Sales Mgr CRDM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	205.00
<b>TOTAL</b> 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 44 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Daniel J Moelands**  
 Full Name (Last, First, Middle Initial)  
 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 Occupation  
 Medtronic Inc. Sr Regulatory Affairs Dir  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354584**  
 Amount of Each Receipt this Period  
 25.00

**B. Mr. David A Montecalvo**  
 Full Name (Last, First, Middle Initial)  
 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 Product Development SHD  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 399.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354441**  
 Amount of Each Receipt this Period  
 19.00

**C. Mr. David E Morrell**  
 Full Name (Last, First, Middle Initial)  
 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 Occupation  
 Medtronic Inc. Prin Program/Project Analyst  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354586**  
 Amount of Each Receipt this Period  
 15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 59.00  
**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 45 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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**

Full Name (Last, First, Middle Initial) <b>A. Mr. Matthew M Morrison</b>		Date of Receipt
Mailing Address 1800 Pyramid Pl Bldg A		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/> 10 / 10 / 2014
City	State	Zip Code
Memphis	TN	38132-1703
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Medtronic Inc.	Sr Engineering Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="273.00"/>	
		Amount of Each Receipt this Period <input type="text" value="13.00"/>

Full Name (Last, First, Middle Initial) <b>B. Mr. James M Morse</b>		Date of Receipt
Mailing Address 710 Medtronic Parkway NE		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/> 10 / 10 / 2014
City	State	Zip Code
Minneapolis	MN	55432
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Medtronic Inc.	Sr Sales Rep SQDM	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="525.00"/>	
		Amount of Each Receipt this Period <input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) <b>C. Mr. Michael C Morton</b>		Date of Receipt
Mailing Address 710 Medtronic Pkwy		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/> 10 / 10 / 2014
City	State	Zip Code
Minneapolis	MN	55432-5603
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Medtronic Inc.	Sr Quality/Reg Aff Prog Dir	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="420.00"/>	
		Amount of Each Receipt this Period <input type="text" value="20.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="58.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 46 OF 69
	(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. Mr. John T Mudgett Jr.**  
 Full Name (Last, First, Middle Initial)  
 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 Marketing Prog Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354443**  
 Amount of Each Receipt this Period  
 100.00

**B. Mr. Mark A Musto**  
 Full Name (Last, First, Middle Initial)  
 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 Regional Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354453**  
 Amount of Each Receipt this Period  
 50.00

**C. Mr. Gary A Nelson**  
 Full Name (Last, First, Middle Initial)  
 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/Risk Mgmt/Legal Admin Serv  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1680.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354350**  
 Amount of Each Receipt this Period  
 80.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 140.00  
**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 47 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Michael J Nicoletta**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1800 Pyramid Pl  
 Bldg D  
 City Memphis State TN Zip Code 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 ▼ 798.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354320**  
 Amount of Each Receipt this Period  
 38.00

**B. Mr. Christopher J O'Connell**  
 Full Name (Last, First, Middle Initial)  
 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 ▼ 4038.51

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354322**  
 Amount of Each Receipt this Period  
 192.31

**C. Mr. Mark A O'Donnell**  
 Full Name (Last, First, Middle Initial)  
 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 Regulatory Aff Diabetes  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1890.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354629**  
 Amount of Each Receipt this Period  
 90.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 320.31  
**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 Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Stephen N Oesterle**  
 Full Name (Last, First, Middle Initial)  
 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 **3675.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354343**  
 Amount of Each Receipt this Period  
**175.00**

**B. Ms. Julie J Otto**  
 Full Name (Last, First, Middle Initial)  
 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 Healthcare Econ Consultant  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354512**  
 Amount of Each Receipt this Period  
**10.00**

**C. Mr. Arlen L Overvig**  
 Full Name (Last, First, Middle Initial)  
 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 **1092.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354457**  
 Amount of Each Receipt this Period  
**52.00**

**SUBTOTAL** of Receipts This Page (optional)..... **237.00**  
**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 49 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Jacob M Paul**  
Full Name (Last, First, Middle Initial)

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 ▼ **546.00**

Date of Receipt **10 / 10 / 2014**

**Transaction ID : A2014-2354515**

Amount of Each Receipt this Period **26.00**

**B. Ms. Luann M Pendency**  
Full Name (Last, First, Middle Initial)

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 Quality

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **4032.00**

Date of Receipt **10 / 10 / 2014**

**Transaction ID : A2014-2354582**

Amount of Each Receipt this Period **192.00**

**C. Mr. Gordon A Peterson**  
Full Name (Last, First, Middle Initial)

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 Sr Marketing Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **10 / 10 / 2014**

**Transaction ID : A2014-2354419**

Amount of Each Receipt this Period **15.00**

**SUBTOTAL** of Receipts This Page (optional)..... **233.00**

**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 50 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Neal R Pfeifer**  
 Full Name (Last, First, Middle Initial)  
 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 Occupation  
 Medtronic Inc. VP Regional Sales  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354353**  
 Amount of Each Receipt this Period  
 20.00

**B. Mr. James R Pierson**  
 Full Name (Last, First, Middle Initial)  
 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. IT Manager  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354493**  
 Amount of Each Receipt this Period  
 10.00

**C. Mr. David W Poley**  
 Full Name (Last, First, Middle Initial)  
 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 Occupation  
 Medtronic Inc. Sr Marketing Director  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 273.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354359**  
 Amount of Each Receipt this Period  
 13.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	43.00
<b>TOTAL</b> 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 51 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Dominic F Presty**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1800 Pyramid Pl  
 Bldg D  
 City Memphis State TN Zip Code 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 **798.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354332**  
 Amount of Each Receipt this Period  
**38.00**

**B. Mr. Larry H Quandt**  
 Full Name (Last, First, Middle Initial)  
 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 Program Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **315.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354605**  
 Amount of Each Receipt this Period  
**15.00**

**C. Mr. Thomas F Reimann**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 826 Coal Creek Cir  
 City Louisville State CO Zip Code 80027-9710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Medtronic Inc. Occupation Sr Quality Systems Director  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354400**  
 Amount of Each Receipt this Period  
**10.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>63.00</b>
<b>TOTAL</b> 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 52 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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) <b>A. Amaza A Reitmeier</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354454</b>
Mailing Address 7000 Central Ave NE PO Box 1350		Amount of Each Receipt this Period 10.00
City Minneapolis	State MN	Zip Code 55432-3568
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation Program Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Pamela M Reitz-Bouren</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354449</b>
Mailing Address 710 Medtronic Parkway NE		Amount of Each Receipt this Period 85.00
City Minneapolis	State MN	Zip Code 55432
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation VP Regional Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1785.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. David H Roberts</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354622</b>
Mailing Address 8200 Coral Sea St NE		Amount of Each Receipt this Period 125.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2625.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	220.00
<b>TOTAL</b> 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 53 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Ms. Erin E Rodgers**  
Full Name (Last, First, Middle Initial)  
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 ▼ **525.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
10	/	10	/	2014

**Transaction ID : A2014-2354583**

Amount of Each Receipt this Period  

115.00
--------

**25.00**

**B. Ms. Sara M Rottunda**  
Full Name (Last, First, Middle Initial)  
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 Program Dir
------------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
10	/	10	/	2014

**Transaction ID : A2014-2354491**

Amount of Each Receipt this Period  

10.00
-------

**10.00**

**C. Mr. Dean E Rustad**  
Full Name (Last, First, Middle Initial)  
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 ▼ **1680.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
10	/	10	/	2014

**Transaction ID : A2014-2354603**

Amount of Each Receipt this Period  

80.00
-------

**80.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>115.00</b>
<b>TOTAL</b> 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 54 OF 69  
(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. Sean M Salmon**

Mailing Address 3540 Unocal Pl

City State Zip Code  
Santa Rosa CA 95403-1774

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Medtronic Inc. SVP Coronary/RDN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
399.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354434**

Amount of Each Receipt this Period  
19.00

Full Name (Last, First, Middle Initial)  
**B. 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 Occupation  
Medtronic Inc. VP Clinical Research CRDM

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2835.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354596**

Amount of Each Receipt this Period  
135.00

Full Name (Last, First, Middle Initial)  
**C. Mr. David J Scheffler**

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. Sr Finance Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
273.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354597**

Amount of Each Receipt this Period  
13.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 167.00

**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 55 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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**

Full Name (Last, First, Middle Initial) <b>A. Ms. Rachael M Scherer</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354337</b>
Mailing Address 8200 Coral Sea St NE		Amount of Each Receipt this Period 150.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3150.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Anthony E Schippers</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354599</b>
Mailing Address 8200 Coral Sea St NE		Amount of Each Receipt this Period 13.00
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 Program Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Melissa Schooley</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354589</b>
Mailing Address 950 F St NW Ste 500		Amount of Each Receipt this Period 25.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	188.00
<b>TOTAL</b> 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 56 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Ms. Jennifer W Schwiebert**  
 Full Name (Last, First, Middle Initial)  
 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 **282.66**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354452**  
 Amount of Each Receipt this Period **13.46**

**B. Mr. Anthony B Semedo**  
 Full Name (Last, First, Middle Initial)  
 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 **2100.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354519**  
 Amount of Each Receipt this Period **100.00**

**C. Mr. Jeffrey G Shapiro**  
 Full Name (Last, First, Middle Initial)  
 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 Dist Sales Mgr Interventional  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354576**  
 Amount of Each Receipt this Period **10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **123.46**  
**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

FOR LINE NUMBER: PAGE 57 OF 69  
(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 M Sheldon**

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. Sr Engineering Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354471**

Amount of Each Receipt this Period  
15.00

Full Name (Last, First, Middle Initial)  
**B. Vipul B Sheth**

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 Occupation  
Medtronic Inc. VP Global Quality Coro/RDN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354328**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. Mr. Ron Shettler**

Mailing Address 1775 Pyramid PI

City State Zip Code  
Memphis TN 38132-1717

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Medtronic Inc. VP Info Tech Spinal

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354362**

Amount of Each Receipt this Period  
60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125.00

**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 58 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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**

Full Name (Last, First, Middle Initial) <b>A. Keyna P Skeffington</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354529</b>
Mailing Address 710 Medtronic Pkwy		Amount of Each Receipt this Period 100.00
City Minneapolis	State MN	Zip Code 55432-5603
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation VP/Deputy GCCorp - Security	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Peter B Slone</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354327</b>
Mailing Address 950 F St NW Ste 500		Amount of Each Receipt this Period 192.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4032.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. John C Smeltzer III</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354499</b>
Mailing Address 710 Medtronic Parkway NE		Amount of Each Receipt this Period 10.00
City Minneapolis	State MN	Zip Code 55432
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation Sr Prin Sales Rep Endovascular	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	302.00
<b>TOTAL</b> 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 59 OF 69
	(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. Ms. Kimberly B Snyder**  
 Full Name (Last, First, Middle Initial)  
 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 Prin IT Bus Systems Analyst  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354612**  
 Amount of Each Receipt this Period  
 100.00

**B. Mr. James D Southwick**  
 Full Name (Last, First, Middle Initial)  
 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 ▼ 1050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354533**  
 Amount of Each Receipt this Period  
 50.00

**C. Mr. David M Steinhaus**  
 Full Name (Last, First, Middle Initial)  
 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 Heart Failure  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354567**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	210.00
<b>TOTAL</b> 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 60 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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**

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 ▼ **420.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 10 / 2014**

**Transaction ID : A2014-2354593**

Amount of Each Receipt this Period  
**200.00**

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 ▼ **1050.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 10 / 2014**

**Transaction ID : A2014-2354518**

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 ▼ **1050.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 10 / 2014**

**Transaction ID : A2014-2354503**

Amount of Each Receipt this Period  
**50.00**

**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: (check only one)	PAGE 61 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Ms. Catherine M Szyman**  
Full Name (Last, First, Middle Initial)

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 ▼ 1050.00

Date of Receipt  
10 / 10 / 2014  
**Transaction ID : A2014-2354356**

Amount of Each Receipt this Period  
50.00

**B. Mr. Michael B Terry**  
Full Name (Last, First, Middle Initial)

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 Prin IC Design Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 399.00

Date of Receipt  
10 / 10 / 2014  
**Transaction ID : A2014-2354410**

Amount of Each Receipt this Period  
19.00

**C. Mr. Matthew F Thomas**  
Full Name (Last, First, Middle Initial)

Mailing Address 1800 Pyramid Pl Bldg D

City Memphis State TN Zip Code 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 ▼ 2940.00

Date of Receipt  
10 / 10 / 2014  
**Transaction ID : A2014-2354401**

Amount of Each Receipt this Period  
140.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 209.00

**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 62 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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**

Full Name (Last, First, Middle Initial) <b>A. Mr. Mark E Thomassy</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354543</b>
Mailing Address 575 Lynnhaven Pkwy Marsh Landing Ste 250		Amount of Each Receipt this Period 25.00
City Virginia Beach	State VA	Zip Code 23452-7350
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Medtronic Inc.	Occupation Corporate Sales Dir MSB	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Darrell G Tilleskjo</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354358</b>
Mailing Address 18000 Devonshire St		Amount of Each Receipt this Period 13.00
City Northridge	State CA	Zip Code 91325-1219
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Medtronic Inc.	Occupation VP Finance Diabetes	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Alan Tillis</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014 <b>Transaction ID : A2014-2354613</b>
Mailing Address 51 James Way		Amount of Each Receipt this Period 25.00
City Eatontown	State NJ	Zip Code 07724-2272
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Medtronic Inc.	Occupation Medical Affairs Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	63.00
<b>TOTAL</b> 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 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Don H Tran**  
Full Name (Last, First, Middle Initial)

Mailing Address 3576 Unocal Pl  
Bldg A

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 Prin R/D Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
10 / 10 / 2014  
**Transaction ID : A2014-2354520**

Amount of Each Receipt this Period  
100.00

**B. Mr. Brian D Urke**  
Full Name (Last, First, Middle Initial)

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 ▼  
4032.00

Date of Receipt  
10 / 10 / 2014  
**Transaction ID : A2014-2354325**

Amount of Each Receipt this Period  
192.00

**C. Mr. James W Vogl**  
Full Name (Last, First, Middle Initial)

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 Sales - Svc Ops CVG

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1680.00

Date of Receipt  
10 / 10 / 2014  
**Transaction ID : A2014-2354323**

Amount of Each Receipt this Period  
80.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 282.00

**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 64 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Mr. Chad W Wade**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1800 Pyramid Pl  
 Bldg B  
 City Memphis State TN Zip Code 38132-1703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Medtronic Inc. Occupation IT Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354481**  
 Amount of Each Receipt this Period  
 9.62

**B. Ms. Cynthia A Walker**  
 Full Name (Last, First, Middle Initial)  
 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 MedEd/Trng/MktRes/ProfRel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354558**  
 Amount of Each Receipt this Period  
 40.00

**C. Mr. Brian E Walton**  
 Full Name (Last, First, Middle Initial)  
 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 ▼ 252.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2014  
**Transaction ID : A2014-2354408**  
 Amount of Each Receipt this Period  
 12.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 61.62  
**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 65 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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. Ms. Karen S Webb**  
Full Name (Last, First, Middle Initial)

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	Occupation
Medtronic Inc.	Sr Sales Rep CRDM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2014

**Transaction ID : A2014-2354455**

Amount of Each Receipt this Period  

10.00
-------

**B. Mr. Jason R Weidman**  
Full Name (Last, First, Middle Initial)

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	Occupation
Medtronic Inc.	VP/GM Coronary

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **565.32**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2014

**Transaction ID : A2014-2354510**

Amount of Each Receipt this Period  

26.92
-------

**C. Mr. Paul C Wikstrom**  
Full Name (Last, First, Middle Initial)

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.	Sr Engineering Prog Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2014

**Transaction ID : A2014-2354418**

Amount of Each Receipt this Period  

10.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>46.92</b>
<b>TOTAL</b> 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 66 OF 69  
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Medtronic Inc. PAC**

**A. Mr. Michael P Williams**  
Full Name (Last, First, Middle Initial)  
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 Prin Sales Rep CRDM  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **315.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354555**  
Amount of Each Receipt this Period **15.00**

**B. Mr. Scott D Wilson**  
Full Name (Last, First, Middle Initial)  
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 Sales Admin Consultant USA  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 10 / 2014**  
**Transaction ID : A2014-2354376**  
Amount of Each Receipt this Period **10.00**

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

Date of Receipt  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>25.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>8069.49</b>

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Medtronic Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Majority Committee PAC--MC PAC**

Mailing Address P.O. Box 10134

City Bakersfield State CA Zip Code 93389

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

**Transaction ID : B534356**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**B. Tony Cardenas for Congress**

Mailing Address 3700 Wilshire Blvd Suite 1050-B

City Los Angeles State CA Zip Code 90010

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 29

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

**Transaction ID : B534361**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. ROSKAM PAC**

Mailing Address P.O. Box 1011

City Wheaton State IL Zip Code 60187

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

**Transaction ID : B534358**

Amount of Each Disbursement this Period

2000.00

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

7000.00

**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"/> 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. ICE PAC**

Mailing Address P.O. Box 752

City Long Lake State MN Zip Code 55356

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

**Transaction ID : B534355**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Crowley for Congress**

Mailing Address 410 1st Street SE Suite 310

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY

District: 14

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

**Transaction ID : B534360**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. House Conservatives Fund**

Mailing Address 228 S. Washington St. Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

**Transaction ID : B534359**

Amount of Each Disbursement this Period

5000.00

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

9500.00

**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"/> 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 PO BOX 3986

City Washington State DC Zip Code 20027

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

**Transaction ID : B534362**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Prosperity PAC**

Mailing Address 1006 Pendleton Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

**Transaction ID : B534357**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

7000.00

23500.00