

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.
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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 **ROBERT G. FRENZ**

Signature of Treasurer ROBERT G. FRENZ [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="31468.53"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="67361.53"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="5886.00"/>	<input type="text" value="66779.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="73247.53"/>	<input type="text" value="98247.53"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="35500.00"/>	<input type="text" value="60500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="37747.53"/>	<input type="text" value="37747.53"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 04 / 01 / 2016 To: 06 / 30 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4314.00	51214.00
(ii) Unitemized	1572.00	15565.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5886.00	66779.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5886.00	66779.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	5886.00	66779.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5886.00	66779.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35500.00	60500.00
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)) ..	35500.00	60500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35500.00	60500.00

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)	5886.00	66779.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5886.00	66779.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 18
	<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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

A. Don Curtis Deno
 Full Name (Last, First, Middle Initial)
 Mailing Address 409 137th Lane NW
 City Andover State MN Zip Code 55304-4164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St. Jude Medical Occupation Scientist Sr Pr, Research
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR537486818134
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

B. Ann Graves
 Full Name (Last, First, Middle Initial)
 Mailing Address 1455 Clippership Court
 City Woodbury State MN Zip Code 55125-8564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St. Jude Medical Occupation VP, Regulatory
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR537507818134
 Amount of Each Receipt this Period 240.00
 Memo Item
 P/R Deduction (\$40.00 Bi-Weekly)

C. William Little
 Full Name (Last, First, Middle Initial)
 Mailing Address 635 Brockton Lane N.
 City Plymouth State MN Zip Code 55447-3338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St. Jude Medical Occupation VP, Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR537508518134
 Amount of Each Receipt this Period 360.00
 Memo Item
 P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	750.00
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 18
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Brenda Inman		Date of Receipt MM / DD / YYYY 06 / 30 / 2016 Transaction ID : PR537552618134
Mailing Address 4260 Lynfield Lane		Amount of Each Receipt this Period 150.00
City San Jose	State CA	Zip Code 95136-1622
FEC ID number of contributing federal political committee.	C	
Name of Employer St. Jude Medical	Occupation Manager, Localization	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		<input type="checkbox"/> Memo Item P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Donald Zurbay		Date of Receipt MM / DD / YYYY 06 / 30 / 2016 Transaction ID : PR537673918134
Mailing Address 10457 Scott Ave N		Amount of Each Receipt this Period 240.00
City Brooklyn Park	State MN	Zip Code 55443-5428
FEC ID number of contributing federal political committee.	C	
Name of Employer St. Jude Medical	Occupation VP, Finance & CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 580.00	
		<input type="checkbox"/> Memo Item P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Jeffry Fecho		Date of Receipt MM / DD / YYYY 06 / 30 / 2016 Transaction ID : PR537674018134
Mailing Address 6165 Fernbrook Lane N		Amount of Each Receipt this Period 240.00
City Plymouth	State MN	Zip Code 55446-3742
FEC ID number of contributing federal political committee.	C	
Name of Employer St. Jude Medical	Occupation VP, Global Quality	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	
		<input type="checkbox"/> Memo Item P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	630.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 18
	<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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

A. Jason Zellers
Full Name (Last, First, Middle Initial)

Mailing Address 3561 Settlers Way

City Stillwater State MN Zip Code 55082-3453

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

Name of Employer St. Jude Medical Occupation VP Gen Counsel and Corp Secretary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
06 / 30 / 2016
Transaction ID : PR537674118134

Amount of Each Receipt this Period
600.00

Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

B. Rachel Ellingson
Full Name (Last, First, Middle Initial)

Mailing Address 5019 Arden Ave

City Edina State MN Zip Code 55424-1315

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

Name of Employer St. Jude Medical Occupation VP, Global Communications

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
06 / 30 / 2016
Transaction ID : PR537674218134

Amount of Each Receipt this Period
480.00

Memo Item

P/R Deduction (\$80.00 Bi-Weekly)

C. Ashli Douglas
Full Name (Last, First, Middle Initial)

Mailing Address 615 25th St. S

City Arlington State VA Zip Code 22202-2529

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

Name of Employer St. Jude Medical Occupation Sr Director Government Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt
06 / 30 / 2016
Transaction ID : PR537714518134

Amount of Each Receipt this Period
480.00

Memo Item

P/R Deduction (\$80.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	1560.00
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 9 OF 18
(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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

A. David Hendrick
 Full Name (Last, First, Middle Initial)
 Mailing Address 2204 Demona Dr
 City Austin State TX Zip Code 78733-1689
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St. Jude Medical Occupation Sr VP, Sales Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR537827218134
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

B. Richard Quesada
 Full Name (Last, First, Middle Initial)
 Mailing Address 26837 Maris Court
 City Sun City State CA Zip Code 92585-8927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St. Jude Medical Occupation Territory Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR767110218134
 Amount of Each Receipt this Period 240.00
 Memo Item
 P/R Deduction (\$40.00 Bi-Weekly)

C. Candace Steele Flippin
 Full Name (Last, First, Middle Initial)
 Mailing Address 215 10th Street #736
 City Minneapolis State MN Zip Code 55415-2106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St. Jude Medical Occupation VP, External Communications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR767137518134
 Amount of Each Receipt this Period 270.00
 Memo Item
 P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 660.00
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 10 OF 18
(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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

A. Carl Eugene Cadwallader
 Full Name (Last, First, Middle Initial)
 Mailing Address 16998 81st Ave N
 City State Zip Code
 Maple Grove MN 55311-1769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SJM VP Supply Chain and PDI
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : PR855273318134
 Amount of Each Receipt this Period
 240.00
 Memo Item
 P/R Deduction (\$40.00 Bi-Weekly)

B. Thomas Skelly
 Full Name (Last, First, Middle Initial)
 Mailing Address 4312 W Roland St
 City State Zip Code
 Tampa FL 33609-3840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 St. Jude Mecial RSD
 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
 06 / 30 / 2016
Transaction ID : PR855480918134
 Amount of Each Receipt this Period
 234.00
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

C. William Trubeck
 Full Name (Last, First, Middle Initial)
 Mailing Address 17333 62nd Ave N
 City State Zip Code
 Maple Grove MN 55311-6405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 St. Jude Medical VP, Info Technology
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : PR855494818134
 Amount of Each Receipt this Period
 240.00
 Memo Item
 P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	714.00
TOTAL This Period (last page this line number only).....▶	4314.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Guthrie for Congress

Mailing Address 499 S Capitol Street SW
Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Candidate Name

Mr. S. Brett Guthrie

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: KY District: 02

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 8160281

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Diana DeGette for Congress

Mailing Address 228 2nd Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Candidate Name

Ms. Diana Degette

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CO District: 01

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 8160282

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Walden For Congress

Mailing Address PO Box 1091

City Hood River State OR Zip Code 97031

Purpose of Disbursement

011

Candidate Name

Rep. Greg Walden

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OR District: 02

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 8160283

Amount of Each Disbursement this Period

2000.00

Memo Item

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

5000.00

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

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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Bucshon for Congress Committee

Mailing Address PO Box 250

City Newburgh State IN Zip Code 47629

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Larry Bucshon

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IN District: 08

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 8160284

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Marsha Blackburn for Congress

Mailing Address 499 South Capitol Street SW
Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Category/
Type

Candidate Name

Ms. Marsha Blackburn

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TN District: 07

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 8160285

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MICHAEL BURGESS FOR CONGRESS

Mailing Address PO Box 2334

City Denton State TX Zip Code 76202

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Michael C. Burgess

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 26

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 8160287

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Tony Cardenas for Congress

Mailing Address 3700 Wilshire Blvd., Ste 1050A

City Los Angeles State CA Zip Code 90010

Purpose of Disbursement

011

Candidate Name

Mr. Tony Cardenas

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 29

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 8160290

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ANNA ESHOO FOR CONGRESS

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement

011

Candidate Name

Ms. Anna Eshoo

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 14

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 8160293

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Valadao For Congress

Mailing Address 5132 N Palm Ave #227

City Fresno State CA Zip Code 93704

Purpose of Disbursement

011

Candidate Name

Rep. David Valadao

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 21

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 8160295

Amount of Each Disbursement this Period

1000.00

Memo Item

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

5000.00

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

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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Swalwell For Congress

Mailing Address P.O. Box 2847

City State Zip Code
Dublin CA 94568

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Eric Swalwell

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 15

Date of Disbursement

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

Transaction ID : 8160297

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Memo Item

Full Name (Last, First, Middle Initial)

B. Pete Aguilar For Congress

Mailing Address PO Box 10954

City State Zip Code
San Bernardino CA 92423

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Pete Aguilar

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 31

Date of Disbursement

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

Transaction ID : 8160298

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Memo Item

Full Name (Last, First, Middle Initial)

C. Scott Peters For Congress

Mailing Address PO Box 70980

City State Zip Code
Washington DC 20024

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Scott Peters

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 52

Date of Disbursement

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

Transaction ID : 8160301

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Memo Item

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

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

3	0	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0

**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

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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Price For Congress

Mailing Address P.O. Box 425

City Roswell State GA Zip Code 30077

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Thomas Price M.D.

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: GA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

Transaction ID : 8160304

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Roskam for Congress

Mailing Address PO Box 713

City Wheaton State IL Zip Code 60189

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Peter Roskam

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

Transaction ID : 8160307

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Dr. Raul Ruiz For Congress

Mailing Address PO Box 3433

City Palm Desert State CA Zip Code 92261

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Raul Ruiz MD

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 36

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

Transaction ID : 8160310

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

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

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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Friends Of Todd Young, Inc.

Mailing Address PO Box 1053

City State Zip Code
Bloomington IN 47402

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Todd Young

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IN District: 09

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 8160312

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Donnelly for Indiana

Mailing Address P.O. Box 891

City State Zip Code
Indianapolis IN 46206

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Joseph Donnelly

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IN District:

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 8160315

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Georgians For Isakson

Mailing Address Post Office Box 250116

City State Zip Code
Atlanta GA 30325

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Johnny Isakson

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: GA District:

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 8160316

Amount of Each Disbursement this Period

2000.00

Memo Item

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

5000.00

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

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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Alexander For Senate Inc

Mailing Address 228 S Washington Street Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011

Candidate Name
Sen. Lamar Alexander

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: TN District:

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 8160318

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. People for Patty Murray

Mailing Address 122 Maryland Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

011

Candidate Name
Ms. Patty Murray

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WA District:

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 8160319

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RICHARD BURR COMMITTEE; THE

Mailing Address POST OFFICE BOX 5928

City WINSTON-SALEM State NC Zip Code 27113

Purpose of Disbursement

011

Candidate Name
Mr. Richard Burr

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NC District:

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : 8160320

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
ST JUDE MEDICAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Portman For Senate Committee

Mailing Address 9856 Archer Lane

City State Zip Code
Dublin OH 43017

Purpose of Disbursement

011

Candidate Name

Sen. Rob Portman

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : 8160321

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Tim Scott For Senate

Mailing Address 1405 Ashley River Road

City State Zip Code
Charleston SC 29407

Purpose of Disbursement

011

Candidate Name

Sen. Tim Scott

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: SC District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : 8160322

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Advamed PAC

Mailing Address 701 Pennsylvania Ave. NW Suite 800

City State Zip Code
Washington DC 20004

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : 8160324

Amount of Each Disbursement this Period

2500.00

Memo Item

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

6500.00

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

35500.00