FEC FORM 1	STATEMEI ORGANIZ	_		PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Masimo Corpora	ation Political Acti	on Committee		
ADDRESS (number and street)				
(Check if address is changed)				
	Irvine └────────────────────────────────────		CA STATE ▲	2618 
COMMITTEE'S E-MAIL ADDR	ESS			
<ul> <li>(Check if address is changed)</li> </ul>	pordal@masimo.com			
	Optional Second E-Mail Ad	dress		
COMMITTEE'S WEB PAGE AI	DDRESS (URL)			
	21 / Y Y Y Y 2019			
3. FEC IDENTIFICATION N	NUMBER ► C C	00493940		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined	this Statement and to the best	of my knowledge and belief i	t is true, correct an	d complete.
Type or Print Name of Treasur	er Ordal, Paul, , ,			
Signature of Treasurer	al, Paul, , ,	[Electronically Filed]	Date 05	/ D D / Y Y Y Y 30 2023
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMA	may subject the person signing TION SHOULD BE REPORTED		e penalties of 52 U.S.C. §30109
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Comple information below.)	ete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate President	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of Candidate	
Party Committee:       (National, State or subordinate) committee of the       (Demo Republic)         (d)       This committee is a       Image: Committee of the or subordinate) committee of the       (Demo Republic)	cratic, lican, etc.) Party
Political Action Committee (PAC):	
(e) <b>x</b> This committee is a separate segregated fund. (Identify connected organization on line 6.) Its com	nected organization is a:
Corporation Corporation w/o Capital Stock	oor Organization
Membership Organization Trade Association Cod	operative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybr	rid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	

2.

This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (i) committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (j) committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser С 1. С

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

## Masimo Corporation Political Action Committee

6.	Name of Any Connected Masimo Corporatio	-	, in the					,	, 0.										1		, U					р ·					
	Mailing Address	52 Discovery																													
		Irvine																Ľ				Ľ	926	518 				- [			
					(	СІТ	Y											ST	ATE						Z	IP	со	DE			
	Relationship: X Connecte	ed Organization	ļ	Affilia	ted	Or	rgar	niza	tior	n	E	J	oint	Fu	ndr	ais	ing	Re	pre	sen	tati	ve			Le	ade	ersh	ip F	PAC	Spc	nsc

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Ordal, Paul	, , ,			
Full Name				
Mailing Address	52 Discovery			
	Irvine 		CA 926	18
		CITY 🔺	STATE A	ZIP CODE
Title or Position ▼				
Treasurer/Vice Presi		<u> </u>	elephone number	297 - 7881

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Ordal, Paul, ,	,																				
of Treasurer																						
Mailing Address	Ľ	52 Discov	very																			
	L																					
	Ľ	Irvine										L	CA		9	2618	<b>;</b>					
					CIT	Y 🔺						ST	ATE				Z	IP (	COD	E		
Title or Position	,																					
Treasurer/Vice Pr	esi							Tel	eph	one	nur	nbe	r	94	9	] – [	2	97			788	1

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Full Name of Designated	Young, Micah, , ,	
Agent		
Mailing Address	52 Discovery	
	Irvine CA 92618	
	CITY A STATE A 2	ZIP CODE
Title or Position	7	
Assistant Treasur	rer Telephone number = 2	297 - 7000

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Comeri	ca Bank			1
Mailing Address	P.O. Box 75000			
	Detroit		MI 48275	
	CITY	<b>▲</b>	STATE ▲	ZIP CODE ▲
Name of Bank, Depository, e	tc.			
Mailing Address				
	CITY	<b>A</b>	STATE A	ZIP CODE ▲