

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Medtronic Inc. Medical Technology Fund

ADDRESS (number and street) 1420 New York Avenue NW Suite 600
 Check if different than previously reported. (ACC)
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** 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 Quarterly 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 (12G)
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 02 01 2006 through 02 28 2006

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 Electronically Filed by Gary Ellis Date 03 17 2006

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
Medtronic Inc. Medical Technology Fund

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		184627.51
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	200119.53									
(c) Total Receipts (from Line 19)	14496.02	29988.04								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	214615.55	214615.55								
7. Total Disbursements (from Line 31)	12000.00	12000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	202615.55	202615.55								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)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. Medical Technology Fund

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	6

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	4960.44	7535.74
(i) Itemized (use Schedule A)	9535.58	22452.30
(ii) Unitemized	14496.02	29988.04
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs) .....	.00	.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	14496.02	29988.04
12. Transfers From Affiliated/Other Party Committees .....	.00	.00
13. All Loans Received .....	.00	.00
14. Loan Repayments Received .....	.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	.00	.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	.00	.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	.00	.00
(b) Levin Funds (from Schedule H5) .....	.00	.00
(c) Total Transfer (add 18(a) and 18(b)).	.00	.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	14496.02	29988.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	14496.02	29988.04

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	.00	.00
(ii) Non-Federal Share.....	.00	.00
(b) Other Federal Operating Expenditures.....	.00	.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	.00	.00
22. Transfers to Affiliated/Other Party Committees.....	.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12000.00	12000.00
24. Independent Expenditure (use Schedule E) .....	.00	.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	.00	.00
26. Loan Repayments Made.....	.00	.00
27. Loans Made.....	.00	.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs) .....	.00	.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	.00	.00
29. Other Disbursements.....	.00	.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	.00	.00
(ii) "Levin" Share .....	.00	.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	.00	.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	.00	.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	12000.00	12000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	12000.00	12000.00

DETAILED SUMMARY PAGE
of Disbursements

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)	14496.02	29988.04
34. Total Contribution Refunds (from Line 28(d)) .....	.00	.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14496.02	29988.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	.00	.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	.00	.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	.00	.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 24
	<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. Medical Technology Fund

A. Full Name (Last, First, Middle Initial)
Susan Alpert

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Sr VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 576.90

Date of Receipt
MM / DD / YYYY
02 / 10 / 2006

Transaction ID: A2006-275317

Amount of Each Receipt this Period
192.30

B. Full Name (Last, First, Middle Initial)
Susan Alpert

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Sr VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 769.20

Date of Receipt
MM / DD / YYYY
02 / 24 / 2006

Transaction ID: A2006-212451

Amount of Each Receipt this Period
192.30

C. Full Name (Last, First, Middle Initial)
Carol A Barnett

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation VP GM Division

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2006

Transaction ID: A2006-275438

Amount of Each Receipt this Period
76.00

SUBTOTAL of Receipts This Page (optional)	▶	460.60
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 24
	<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. Medical Technology Fund

Full Name (Last, First, Middle Initial) A. Carol A Barnett		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-212572	
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 76.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Medtronic Inc.	Occupation VP GM Division		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.00		

Full Name (Last, First, Middle Initial) B. Dale F Beumer		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 6	
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-275310	
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 76.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Medtronic Inc.	Occupation VP Fin/Admin		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00		

Full Name (Last, First, Middle Initial) C. Dale F Beumer		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-212444	
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 76.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Medtronic Inc.	Occupation VP Fin/Admin		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.00		

SUBTOTAL of Receipts This Page (optional) ▶	228.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 24
	<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. Medical Technology Fund

A. Full Name (Last, First, Middle Initial)
Terrance L Carlson

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Sr VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
576.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2006

Transaction ID: A2006-275469

Amount of Each Receipt this Period
192.00

B. Full Name (Last, First, Middle Initial)
Terrance L Carlson

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Sr VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
768.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2006

Transaction ID: A2006-212603

Amount of Each Receipt this Period
192.00

C. Full Name (Last, First, Middle Initial)
Michael F DeMane

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Sr VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
576.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2006

Transaction ID: A2006-275468

Amount of Each Receipt this Period
192.00

SUBTOTAL of Receipts This Page (optional)	▶	576.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 24
	<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. Medical Technology Fund

Full Name (Last, First, Middle Initial) A. Michael F DeMane		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-212602	
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 192.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Medtronic Inc.	Occupation Sr VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 768.00		

Full Name (Last, First, Middle Initial) B. Gary L Ellis		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6	
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-275412	
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 193.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Medtronic Inc.	Occupation VP Corp Controller/Treasurer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 579.00		

Full Name (Last, First, Middle Initial) C. Gary L Ellis		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-212546	
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 193.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Medtronic Inc.	Occupation VP Corp Controller/Treasurer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 772.00		

SUBTOTAL of Receipts This Page (optional) ▶	578.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 24
	<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. Medical Technology Fund

Full Name (Last, First, Middle Initial) A. Paul C Erdahl		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-212522
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 57.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation VP Exec Leadership & Dev	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00	

Full Name (Last, First, Middle Initial) B. Janet S Fiola		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-275424
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 76.92	
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation Sr VP HR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	

Full Name (Last, First, Middle Initial) C. Janet S Fiola		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-212558
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 76.92	
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation Sr VP HR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

SUBTOTAL of Receipts This Page (optional) ▶	210.84
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 24
	<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. Medical Technology Fund

A. Full Name (Last, First, Middle Initial)
Mark Fletcher

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation VP/GM ENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2006

Transaction ID: A2006-275364

Amount of Each Receipt this Period
76.00

B. Full Name (Last, First, Middle Initial)
Mark Fletcher

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation VP/GM ENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2006

Transaction ID: A2006-212498

Amount of Each Receipt this Period
76.00

C. Full Name (Last, First, Middle Initial)
William A Hawkins

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Sr VP & Pres

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 576.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2006

Transaction ID: A2006-275320

Amount of Each Receipt this Period
192.00

SUBTOTAL of Receipts This Page (optional)	344.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 24
	<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. Medical Technology Fund

A. Full Name (Last, First, Middle Initial)
William A Hawkins

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Occupation
Medtronic Inc. Sr VP & Pres

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 768.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 4 / 2 0 0 6

Transaction ID: A2006-212454

Amount of Each Receipt this Period
192.00

B. Full Name (Last, First, Middle Initial)
Robert Hubert

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Occupation
Medtronic Inc. VP/GM Heart Valves

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 228.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: A2006-275456

Amount of Each Receipt this Period
76.00

C. Full Name (Last, First, Middle Initial)
Robert Hubert

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Occupation
Medtronic Inc. VP/GM Heart Valves

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 304.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 4 / 2 0 0 6

Transaction ID: A2006-212590

Amount of Each Receipt this Period
76.00

SUBTOTAL of Receipts This Page (optional)	▶	344.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 24
	<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. Medical Technology Fund

Full Name (Last, First, Middle Initial) A. David Fletcher Miller		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6	
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-275351	
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 115.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Medtronic Inc.	Occupation VP/GM		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00		

Full Name (Last, First, Middle Initial) B. David Fletcher Miller		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-212485	
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 115.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Medtronic Inc.	Occupation VP/GM		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00		

Full Name (Last, First, Middle Initial) C. David A Ness		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-212562	
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 57.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Medtronic Inc.	Occupation VP Compensation & Benefits		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00		

SUBTOTAL of Receipts This Page (optional) ▶	287.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 24
	<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. Medical Technology Fund

Full Name (Last, First, Middle Initial) A. Robert W Perry		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-275466
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 76.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation VP/GM Neurologic Technologies	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00	

Full Name (Last, First, Middle Initial) B. Robert W Perry		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-212600
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 76.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation VP/GM Neurologic Technologies	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.00	

Full Name (Last, First, Middle Initial) C. Herbert F Riband		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-275618
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 76.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00	

SUBTOTAL of Receipts This Page (optional) ▶	228.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 24
	<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. Medical Technology Fund

A. Full Name (Last, First, Middle Initial)
Herbert F Riband

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Occupation
Medtronic Inc. EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2006

Transaction ID: A2006-212752

Amount of Each Receipt this Period
76.00

B. Full Name (Last, First, Middle Initial)
John L Ross

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Occupation
Medtronic Inc. VP CRM Business Economics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2006

Transaction ID: A2006-212566

Amount of Each Receipt this Period
57.00

C. Full Name (Last, First, Middle Initial)
Todd N Sheldon

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Occupation
Medtronic Inc. VP/Sr Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2006

Transaction ID: A2006-212517

Amount of Each Receipt this Period
57.00

SUBTOTAL of Receipts This Page (optional)	▶	190.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 24
	<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. Medical Technology Fund

Full Name (Last, First, Middle Initial) A. Ron Shettler		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 4 / 2 0 0 6
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-212580
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation VP Info Tech	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Peter B Slone		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-275335
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 115.00	
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 ▼ 345.00	

Full Name (Last, First, Middle Initial) C. Peter B Slone		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 4 / 2 0 0 6
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-212469
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 115.00	
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 ▼ 460.00	

SUBTOTAL of Receipts This Page (optional) ▶	290.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 24
	<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. Medical Technology Fund

Full Name (Last, First, Middle Initial) A. Marshall S Stanton		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-275374
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 76.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation VP Therapy Dev & Medical Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00	

Full Name (Last, First, Middle Initial) B. Marshall S Stanton		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-212508
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 76.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation VP Therapy Dev & Medical Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.00	

Full Name (Last, First, Middle Initial) C. Mr. Oern R Stuge		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address 2900 Thomas Avenue South		Transaction ID: A2006-275631
City State Zip Code Minneapolis MN 55416	Amount of Each Receipt this Period 192.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Medtronic Inc.	Occupation Pres Cardiac Surgery	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.00	

SUBTOTAL of Receipts This Page (optional) ▶	344.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 24
	<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. Medical Technology Fund

Full Name (Last, First, Middle Initial) A. Mr. Oern R Stuge		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 2900 Thomas Avenue South		Transaction ID: A2006-212765	
City State Zip Code Minneapolis MN 55416	Amount of Each Receipt this Period 192.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Medtronic Inc.	Occupation Pres Cardiac Surgery		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 768.00		

Full Name (Last, First, Middle Initial) B. Jon T Tremmel		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 6	
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-275426	
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 76.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Medtronic Inc.	Occupation VP and Pres		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00		

Full Name (Last, First, Middle Initial) C. Jon T Tremmel		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-212560	
City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 76.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Medtronic Inc.	Occupation VP and Pres		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.00		

SUBTOTAL of Receipts This Page (optional) ▶	344.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 24
	<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. Medical Technology Fund

Full Name (Last, First, Middle Initial) A. Scott R Ward		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6	
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-275309	
City State Zip Code Minneapolis MN 55432		Amount of Each Receipt this Period 192.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Medtronic Inc. Sr VP & Pres			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 576.00	

Full Name (Last, First, Middle Initial) B. Scott R Ward		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-212443	
City State Zip Code Minneapolis MN 55432		Amount of Each Receipt this Period 192.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Medtronic Inc. Sr VP & Pres			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 768.00	

Full Name (Last, First, Middle Initial) C. Robert S White		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6	
Mailing Address 710 Medtronic Parkway		Transaction ID: A2006-275330	
City State Zip Code Minneapolis MN 55432		Amount of Each Receipt this Period 76.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Medtronic Inc. VP/GM Physio-Control			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 228.00	

SUBTOTAL of Receipts This Page (optional) ▶	460.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 20 / 24	
	(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"/> 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. Medical Technology Fund

A. Full Name (Last, First, Middle Initial)
Robert S White

Mailing Address 710 Medtronic Parkway

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Occupation
Medtronic Inc. VP/GM Physio-Control

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
304.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2006

Transaction ID: A2006-212464

Amount of Each Receipt this Period
76.00

SUBTOTAL of Receipts This Page (optional)	▶	76.00
TOTAL This Period (last page this line number only)	▶	4960.44

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)

PAGE 21 / 24

<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. Medical Technology Fund

Full Name (Last, First, Middle Initial) A. Re-elect Bobby Jindal		Transaction ID: B134003 Date of Disbursement 02 / 07 / 2006
Mailing Address P.O. Box 8628		Amount of Each Disbursement this Period 1000.00
City Metairie State LA Zip Code 70011	011 Category/ Type	
Purpose of Disbursement P-2006 U.S. House 01 LA		
Candidate Name Bobby Jindal		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 01	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hoyer for Congress		Transaction ID: B134005 Date of Disbursement 02 / 07 / 2006
Mailing Address 7905 Malcolm Road Suite 102		Amount of Each Disbursement this Period 1000.00
City Clinton State MD Zip Code 20735	011 Category/ Type	
Purpose of Disbursement P-2006 U.S. House 05 MD		
Candidate Name Steny H Hoyer		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Crapo for US Senate		Transaction ID: B134757 Date of Disbursement 02 / 27 / 2006
Mailing Address P.O. Box 1948		Amount of Each Disbursement this Period 1000.00
City Boise State ID Zip Code 83701	011 Category/ Type	
Purpose of Disbursement P-2010 U.S. Senate ID		
Candidate Name Michael D Crapo		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ID District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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NAME OF COMMITTEE (In Full)
Medtronic Inc. Medical Technology Fund

Full Name (Last, First, Middle Initial) A. Johnson for Congress Cmte		Transaction ID: B134760 Date of Disbursement 02 / 27 / 2006	
Mailing Address P.O. Box 1986		Amount of Each Disbursement this Period 1000.00	
City New Britain	State CT	Zip Code 06050	011 Category/ Type
Purpose of Disbursement P-2006 U.S. House 05 CT		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Nancy L Johnson			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CT District: 05		

Full Name (Last, First, Middle Initial) B. Friends of Rosa DeLauro		Transaction ID: B134756 Date of Disbursement 02 / 27 / 2006	
Mailing Address 49 Huntington Street		Amount of Each Disbursement this Period 1000.00	
City New Haven	State CT	Zip Code 06511	011 Category/ Type
Purpose of Disbursement P-2006 U.S. House 03 CT		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Rosa DeLauro			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CT District: 03		

Full Name (Last, First, Middle Initial) C. Woolsey for Congress		Transaction ID: B134758 Date of Disbursement 02 / 27 / 2006	
Mailing Address P.O. Box 750176		Amount of Each Disbursement this Period 1000.00	
City Petaluma	State CA	Zip Code 94975	011 Category/ Type
Purpose of Disbursement P-2006 U.S. House 06 CA		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Lynn Woolsey			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 06		

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)

PAGE 23 / 24

<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. Medical Technology Fund

Full Name (Last, First, Middle Initial) A. Ellen Tauscher for Congress		Transaction ID: B134759 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6
Mailing Address 20 Park Road Suite E		Amount of Each Disbursement this Period 1000.00
City Burlingame State CA Zip Code 94010	011 Category/Type	
Purpose of Disbursement P-2006 U.S. House 10 CA		
Candidate Name Ellen O Tauscher		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 10	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Northstar Leadership PAC		Transaction ID: B137019 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 4365		Amount of Each Disbursement this Period 5000.00
City St. Paul State MN Zip Code 55104	011 Category/Type	
Purpose of Disbursement O-2006 Fed Multi-cand. PAC US		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: US District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

SUBTOTAL of Disbursements This Page (optional) ►

6000.00

TOTAL This Period (last page this line number only) ►

12000.00

Image# 26990345530

Form/Schedule: SA11A1

Transaction ID:

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.
