

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

12FE4M5

Medtronic Inc. PAC

ADDRESS (number and street) ▼

950 F Street NW Suite 500

Check if different than previously reported. (ACC)

Washington

DC

20004

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00311878

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

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

(c) 12-Day PRE-Election Report for the:

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day POST-Election Report for the:

- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
02 / 01 / 2016

through

M M M / D D D / Y Y Y Y Y Y
02 / 29 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gary Ellis

Signature of Treasurer

Gary Ellis

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
03 / 18 / 2016

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

Office Use Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Medtronic Inc. PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="156926.83"/>	<input type="text" value="156926.83"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="192785.50"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="25407.56"/>	<input type="text" value="61266.23"/>
(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="218193.06"/>	<input type="text" value="218193.06"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="46000.00"/>	<input type="text" value="46000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="172193.06"/>	<input type="text" value="172193.06"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Medtronic Inc. PAC

Report Covering the Period: From: 02 / 01 / 2016 To: 02 / 29 / 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).....	14263.31	22996.70
(ii) Unitemized	11144.25	38269.53
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	25407.56	61266.23
(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)	25407.56	61266.23
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))..... ▶	25407.56	61266.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	25407.56	61266.23

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	46000.00	46000.00
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)) ..	46000.00	46000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46000.00	46000.00

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)	25407.56	61266.23
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25407.56	61266.23
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 60
	<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)
Medtronic Inc. PAC

Full Name (Last, First, Middle Initial) A. Kristina Pisanelli		Date of Receipt MM / DD / YYYY 02 / 26 / 2016 Transaction ID : A2016-426713
Mailing Address 710 Medtronic Parkway NE		Amount of Each Receipt this Period 192.00
City Minneapolis	State MN	Zip Code 55432
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item	
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 ▼ 384.00	

Full Name (Last, First, Middle Initial) B. Mr. Ross A Allen		Date of Receipt MM / DD / YYYY 02 / 12 / 2016 Transaction ID : A2016-218012
Mailing Address 1800 Pyramid Pl Bldg C		Amount of Each Receipt this Period 80.00
City Memphis	State TN	Zip Code 38132-1703
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item	
Name of Employer Medtronic Inc.	Occupation VP Finance Spinal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) C. Mr. Ross A Allen		Date of Receipt MM / DD / YYYY 02 / 26 / 2016 Transaction ID : A2016-426263
Mailing Address 1800 Pyramid Pl Bldg C		Amount of Each Receipt this Period 80.00
City Memphis	State TN	Zip Code 38132-1703
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item	
Name of Employer Medtronic Inc.	Occupation VP Finance Spinal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	352.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI
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.

Form/Schedule:
Transaction ID:

**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 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Neil P Ayotte
Full Name (Last, First, Middle Initial)
Mailing Address 8200 Coral Sea St NE
City Mounds View State MN Zip Code 55112-4391
FEC ID number of contributing federal political committee. **C**
Name of Employer Medtronic Inc. Occupation VP/Deputy General Counsel CVG
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-218105
Amount of Each Receipt this Period **125.00**
 Memo Item

B. Mr. Neil P Ayotte
Full Name (Last, First, Middle Initial)
Mailing Address 8200 Coral Sea St NE
City Mounds View State MN Zip Code 55112-4391
FEC ID number of contributing federal political committee. **C**
Name of Employer Medtronic Inc. Occupation VP/Deputy General Counsel CVG
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **625.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426355
Amount of Each Receipt this Period **125.00**
 Memo Item

C. Ms. Jessica E Battaglia
Full Name (Last, First, Middle Initial)
Mailing Address 950 F St NW Ste 500
City Washington State DC Zip Code 20004-1478
FEC ID number of contributing federal political committee. **C**
Name of Employer Medtronic Inc. Occupation Govt Affairs Consultant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426412
Amount of Each Receipt this Period **50.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
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 9 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)
A. Geoffrey Becker

Mailing Address 710 Medtronic Parkway NE

City	State	Zip Code
Minneapolis	MN	55432

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

Name of Employer	Occupation
Medtronic Inc.	Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2016
Transaction ID : A2016-218395

Amount of Each Receipt this Period
 75.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Geoffrey Becker

Mailing Address 710 Medtronic Parkway NE

City	State	Zip Code
Minneapolis	MN	55432

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

Name of Employer	Occupation
Medtronic Inc.	Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2016
Transaction ID : A2016-426651

Amount of Each Receipt this Period
 75.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Mr. Steve Blazewski

Mailing Address 15 Hampshire Street

City	State	Zip Code
Mansfield	MA	02048

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

Name of Employer	Occupation
Covidien Holdings Inc.	VP & GENERAL MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
384.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2016
Transaction ID : A2016-218367

Amount of Each Receipt this Period
 192.30

Memo Item

SUBTOTAL of Receipts This Page (optional).....	342.30
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 10 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Steve Blazejewski
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Hampshire Street
 City Mansfield State MA Zip Code 02048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Covidien Holdings Inc. Occupation VP & GENERAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 576.90

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426622
 Amount of Each Receipt this Period 192.30
 Memo Item

B. Mr. Patrick E Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City Minneapolis State MN Zip Code 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Area Sales CVG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 571.44

Date of Receipt 02 / 12 / 2016
Transaction ID : A2016-218279
 Amount of Each Receipt this Period 142.86
 Memo Item

C. Mr. Patrick E Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City Minneapolis State MN Zip Code 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Area Sales CVG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 714.30

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426533
 Amount of Each Receipt this Period 142.86
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	478.02
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 11 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Robert G Carson
Full Name (Last, First, Middle Initial)

Mailing Address 1800 Pyramid Pl
Bldg D

City Memphis State TN Zip Code 38132-1703

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

Name of Employer Medtronic Inc. Occupation VP Marketing Complex Spine

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
MM / DD / YYYY
02 / 12 / 2016

Transaction ID : A2016-218175

Amount of Each Receipt this Period
80.00

Memo Item

B. Mr. Robert G Carson
Full Name (Last, First, Middle Initial)

Mailing Address 1800 Pyramid Pl
Bldg D

City Memphis State TN Zip Code 38132-1703

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

Name of Employer Medtronic Inc. Occupation VP Marketing Complex Spine

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2016

Transaction ID : A2016-426425

Amount of Each Receipt this Period
80.00

Memo Item

C. Mr. Edward S Chin
Full Name (Last, First, Middle Initial)

Mailing Address 1800 Pyramid Pl
Bldg D

City Memphis State TN Zip Code 38132-1703

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

Name of Employer Medtronic Inc. Occupation Sr Regulatory Affairs Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2016

Transaction ID : A2016-426266

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00

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 12 OF 60
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Jeffrey B Clark
Full Name (Last, First, Middle Initial)

Mailing Address 3850 Brickway Blvd

City Santa Rosa State CA Zip Code 95403-8223

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

Name of Employer Medtronic Inc. Occupation Clinical Research Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 12 / 2016
Transaction ID : A2016-218171

Amount of Each Receipt this Period 75.00

Memo Item

B. Mr. Jeffrey B Clark
Full Name (Last, First, Middle Initial)

Mailing Address 3850 Brickway Blvd

City Santa Rosa State CA Zip Code 95403-8223

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

Name of Employer Medtronic Inc. Occupation Clinical Research Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426421

Amount of Each Receipt this Period 75.00

Memo Item

C. Mr. Robert E Clark
Full Name (Last, First, Middle Initial)

Mailing Address 710 Medtronic Pkwy

City Minneapolis State MN Zip Code 55432-5603

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

Name of Employer Medtronic Inc. Occupation VP Corporate Communications

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 12 / 2016
Transaction ID : A2016-217984

Amount of Each Receipt this Period 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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 13 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Robert E Clark
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Corporate Communications
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426235
 Amount of Each Receipt this Period **100.00**
 Memo Item

B. Mr. Michael J Coyle
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation EVP Cardiac and Vascular Grp
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **768.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-218337
 Amount of Each Receipt this Period **192.00**
 Memo Item

C. Mr. Michael J Coyle
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation EVP Cardiac and Vascular Grp
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **960.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426592
 Amount of Each Receipt this Period **192.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	484.00
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 14 OF 60 (check only one) <table style="width:100%; border: none;"> <tr> <td style="border: none;"><input checked="" type="checkbox"/> 11a</td> <td style="border: none;"><input type="checkbox"/> 11b</td> <td style="border: none;"><input type="checkbox"/> 11c</td> <td style="border: none;"><input type="checkbox"/> 12</td> <td style="border: none;"><input type="checkbox"/> 13</td> <td style="border: none;"><input type="checkbox"/> 14</td> <td style="border: none;"><input type="checkbox"/> 15</td> <td style="border: none;"><input type="checkbox"/> 16</td> <td style="border: none;"><input type="checkbox"/> 17</td> </tr> </table>	<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
<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)
Medtronic Inc. PAC

Full Name (Last, First, Middle Initial) A. Mr. Charles L Dennis II Mailing Address 8200 Coral Sea St NE City Mounds View State MN Zip Code 55112-4391 FEC ID number of contributing federal political committee. C Name of Employer Medtronic Inc. Occupation VP Open Innovation - IP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 540.00	Date of Receipt 02 / 12 / 2016 Transaction ID : A2016-217996 Amount of Each Receipt this Period 135.00 <input type="checkbox"/> Memo Item
--	---

Full Name (Last, First, Middle Initial) B. Mr. Charles L Dennis II Mailing Address 8200 Coral Sea St NE City Mounds View State MN Zip Code 55112-4391 FEC ID number of contributing federal political committee. C Name of Employer Medtronic Inc. Occupation VP Open Innovation - IP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 675.00	Date of Receipt 02 / 26 / 2016 Transaction ID : A2016-426247 Amount of Each Receipt this Period 135.00 <input type="checkbox"/> Memo Item
--	---

Full Name (Last, First, Middle Initial) C. Mr. Craig L Drager Mailing Address 6743 Southpoint Dr N City Jacksonville State FL Zip Code 32216-6218 FEC ID number of contributing federal political committee. C Name of Employer Medtronic Inc. Occupation VP R/D and ProjMgmt Surg Tech Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00	Date of Receipt 02 / 12 / 2016 Transaction ID : A2016-217993 Amount of Each Receipt this Period 90.00 <input type="checkbox"/> Memo Item
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SUBTOTAL of Receipts This Page (optional).....▶	360.00
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 15 OF 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Craig L Drager
 Full Name (Last, First, Middle Initial)
 Mailing Address 6743 Southpoint Dr N
 City Jacksonville State FL Zip Code 32216-6218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP R/D and ProjMgmt Surg Tech
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **450.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426244
 Amount of Each Receipt this Period **90.00**
 Memo Item

B. Mr. Gary L Ellis
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation SVP and Chief Financial Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **768.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-218013
 Amount of Each Receipt this Period **192.00**
 Memo Item

C. Mr. Gary L Ellis
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation SVP and Chief Financial Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **960.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426264
 Amount of Each Receipt this Period **192.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	474.00
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 16 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Kenneth W Fairchild
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Global Rewards
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 02 / 12 / 2016
Transaction ID : A2016-217992
 Amount of Each Receipt this Period 135.00
 Memo Item

B. Mr. Kenneth W Fairchild
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Global Rewards
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426243
 Amount of Each Receipt this Period 135.00
 Memo Item

C. Mr. Jeffrey A Farkas
 Full Name (Last, First, Middle Initial)
 Mailing Address 950 F St NW Ste 500
 City Washington State DC Zip Code 20004-1478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP US Federal Reimbursement
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 02 / 12 / 2016
Transaction ID : A2016-217990
 Amount of Each Receipt this Period 77.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	347.00
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 17 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Jeffrey A Farkas
 Full Name (Last, First, Middle Initial)
 Mailing Address 950 F St NW
 Ste 500
 City Washington State DC Zip Code 20004-1478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP US Federal Reimbursement
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **385.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426241
 Amount of Each Receipt this Period **77.00**
 Memo Item

B. Mr. Brian S Felton
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP and Chief Counsel Neuro
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **480.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-218249
 Amount of Each Receipt this Period **120.00**
 Memo Item

C. Mr. Brian S Felton
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP and Chief Counsel Neuro
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426502
 Amount of Each Receipt this Period **120.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	317.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Mark Fletcher
 Full Name (Last, First, Middle Initial)
 Mailing Address 6743 Southpoint Dr N
 City Jacksonville State FL Zip Code 32216-6218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation SVP and President Surg Tech
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **304.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-217997
 Amount of Each Receipt this Period **76.00**
 Memo Item

B. Mr. Mark Fletcher
 Full Name (Last, First, Middle Initial)
 Mailing Address 6743 Southpoint Dr N
 City Jacksonville State FL Zip Code 32216-6218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation SVP and President Surg Tech
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **380.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426248
 Amount of Each Receipt this Period **76.00**
 Memo Item

C. Ms. Ann H Fogerson
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City Mounds View State MN Zip Code 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation Sr HR Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **320.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-218033
 Amount of Each Receipt this Period **80.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	232.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Ms. Ann H Fogerson
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City Mounds View State MN Zip Code 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation Sr HR Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426283
 Amount of Each Receipt this Period **80.00**
 Memo Item

B. Ms. Suzanne M Foster
 Full Name (Last, First, Middle Initial)
 Mailing Address 180 International Dr
 City Portsmouth State NH Zip Code 03801-6837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP/GM Advanced Energy ST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426595
 Amount of Each Receipt this Period **50.00**
 Memo Item

C. Mr. John L Foust
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City Minneapolis State MN Zip Code 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation Interventional Sale Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426526
 Amount of Each Receipt this Period **50.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 20 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Ms. Colleen M Fowler
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City State Zip Code
 Minneapolis MN 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Medtronic Inc. VP Regional Sales
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 02 / 12 / 2016
Transaction ID : A2016-218232
 Amount of Each Receipt this Period
 125.00
 Memo Item

B. Ms. Colleen M Fowler
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City State Zip Code
 Minneapolis MN 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Medtronic Inc. VP Regional Sales
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 625.00

Date of Receipt
 02 / 26 / 2016
Transaction ID : A2016-426485
 Amount of Each Receipt this Period
 125.00
 Memo Item

C. Mr. David J Gamgort
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City State Zip Code
 Minneapolis MN 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Medtronic Inc. VP National SalesCRDM AF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 02 / 12 / 2016
Transaction ID : A2016-218003
 Amount of Each Receipt this Period
 80.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	330.00
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 21 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

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

Mailing Address 710 Medtronic Parkway NE

City	State	Zip Code
Minneapolis	MN	55432

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

Name of Employer	Occupation
Medtronic Inc.	VP National SalesCRDM AF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	26	/	2016

Transaction ID : A2016-426254

Amount of Each Receipt this Period

80.00

 Memo Item

B. Mr. Roland T Garey
Full Name (Last, First, Middle Initial)

Mailing Address 8000 Regency Pkwy Ste 260

City	State	Zip Code
Cary	NC	27518-8590

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

Name of Employer	Occupation
Medtronic Inc.	VP Regional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	26	/	2016

Transaction ID : A2016-426467

Amount of Each Receipt this Period

50.00

 Memo Item

C. Mr. Christopher G Garland
Full Name (Last, First, Middle Initial)

Mailing Address 8200 Coral Sea St NE

City	State	Zip Code
Mounds View	MN	55112-4391

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

Name of Employer	Occupation
Medtronic Inc.	VP Communications/PR CVG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	26	/	2016

Transaction ID : A2016-426444

Amount of Each Receipt this Period

50.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 22 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Michael C Genau
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation SVP and President U.S. Region
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date **768.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-218329
 Amount of Each Receipt this Period **192.00**
 Memo Item

B. Mr. Michael C Genau
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation SVP and President U.S. Region
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date **960.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426584
 Amount of Each Receipt this Period **192.00**
 Memo Item

C. Mr. Michael J Gill
 Full Name (Last, First, Middle Initial)
 Mailing Address 18000 Devonshire St
 City Northridge State CA Zip Code 91325-1219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Sales Diabetes
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date **400.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-218179
 Amount of Each Receipt this Period **100.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	484.00
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 23 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Michael J Gill
 Full Name (Last, First, Middle Initial)
 Mailing Address 18000 Devonshire St
 City Northridge State CA Zip Code 91325-1219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Sales Diabetes
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426429
 Amount of Each Receipt this Period **100.00**
 Memo Item

B. Christian R Hadland
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City Mounds View State MN Zip Code 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Quality CVG
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-217988
 Amount of Each Receipt this Period **100.00**
 Memo Item

C. Christian R Hadland
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City Mounds View State MN Zip Code 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Quality CVG
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426239
 Amount of Each Receipt this Period **100.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
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 24 OF 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Hooman Hakami
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City State Zip Code
 Minneapolis MN 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Medtronic Inc. Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 768.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2016
Transaction ID : A2016-218416
 Amount of Each Receipt this Period
 192.00
 Memo Item

B. Hooman Hakami
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City State Zip Code
 Minneapolis MN 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Medtronic Inc. Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 960.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2016
Transaction ID : A2016-426672
 Amount of Each Receipt this Period
 192.00
 Memo Item

C. Mr. Bryan E Hanson
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City State Zip Code
 Mounds View MN 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Medtronic Inc. Sr Prin IT Technologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 576.93

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2016
Transaction ID : A2016-218282
 Amount of Each Receipt this Period
 192.31
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	576.31
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Bryan E Hanson
Full Name (Last, First, Middle Initial)

Mailing Address 8200 Coral Sea St NE

City Mounds View State MN Zip Code 55112-4391

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

Name of Employer Medtronic Inc. Occupation Sr Prin IT Technologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **769.24**

Date of Receipt **02 / 26 / 2016**

Transaction ID : A2016-426536

Amount of Each Receipt this Period **192.31**

Memo Item

B. Thomas Harkin
Full Name (Last, First, Middle Initial)

Mailing Address 15 Hampshire Street

City Mansfield State MA Zip Code 02048

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

Name of Employer Covidien Holdings Inc. Occupation Director of Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **223.50**

Date of Receipt **02 / 12 / 2016**

Transaction ID : A2016-218378

Amount of Each Receipt this Period **74.50**

Memo Item

C. Thomas Harkin
Full Name (Last, First, Middle Initial)

Mailing Address 15 Hampshire Street

City Mansfield State MA Zip Code 02048

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

Name of Employer Covidien Holdings Inc. Occupation Director of Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **298.00**

Date of Receipt **02 / 26 / 2016**

Transaction ID : A2016-426633

Amount of Each Receipt this Period **74.50**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **341.31**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 60
	<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)
Medtronic Inc. PAC

A. Mr. Doug Hoekstra
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Corp Controller
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426256
 Amount of Each Receipt this Period **50.00**
 Memo Item

B. Mr. William B Holmes
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City Minneapolis State MN Zip Code 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-218215
 Amount of Each Receipt this Period **100.00**
 Memo Item

C. Mr. William B Holmes
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City Minneapolis State MN Zip Code 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426465
 Amount of Each Receipt this Period **100.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
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 27 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Andrew W Horstman
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Corp Intell Prop Litigation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426326
 Amount of Each Receipt this Period **50.00**
 Memo Item

B. Ms. Joan D Humes
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Deputy GCounsel Litigation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **320.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-218343
 Amount of Each Receipt this Period **80.00**
 Memo Item

C. Ms. Joan D Humes
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Deputy GCounsel Litigation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426598
 Amount of Each Receipt this Period **80.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **210.00**
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 28 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)
A. Enrique Iturriaga

Mailing Address 710 Medtronic Parkway NE

City	State	Zip Code
Minneapolis	MN	55432

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

Name of Employer	Occupation
Medtronic Inc.	Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2016
Transaction ID : A2016-42693

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 710 Medtronic Pkwy

City	State	Zip Code
Minneapolis	MN	55432-5603

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

Name of Employer	Occupation
Medtronic Inc.	VP and Chief IP Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2016
Transaction ID : A2016-218079

Amount of Each Receipt this Period
75.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Mr. Michael J Jaro

Mailing Address 710 Medtronic Pkwy

City	State	Zip Code
Minneapolis	MN	55432-5603

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

Name of Employer	Occupation
Medtronic Inc.	VP and Chief IP Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2016
Transaction ID : A2016-426329

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Ms. Sandra C Kalter
 Full Name (Last, First, Middle Initial)
 Mailing Address 950 F St NW
 Ste 500
 City Washington State DC Zip Code 20004-1478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP/Chief Counsel RegulatorySer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426435
 Amount of Each Receipt this Period **50.00**
 Memo Item

B. Ms. Angela S Kramer
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City Minneapolis State MN Zip Code 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation Prin Sales Rep CRDM
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426489
 Amount of Each Receipt this Period **50.00**
 Memo Item

C. Mr. Alan J Kupka
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City Mounds View State MN Zip Code 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation Sr Prin Compliance/Audit Spec
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426309
 Amount of Each Receipt this Period **50.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
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 30 OF 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Christopher G Landon
 Full Name (Last, First, Middle Initial)
 Mailing Address 1800 Pyramid Pl
 Bldg C
 City Memphis State TN Zip Code 38132-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Market Degenerative Spine
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **320.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-218074
 Amount of Each Receipt this Period **80.00**
 Memo Item

B. Mr. Christopher G Landon
 Full Name (Last, First, Middle Initial)
 Mailing Address 1800 Pyramid Pl
 Bldg C
 City Memphis State TN Zip Code 38132-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Market Degenerative Spine
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426324
 Amount of Each Receipt this Period **80.00**
 Memo Item

C. Brad Lerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City Minneapolis State MN Zip Code 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **768.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-218402
 Amount of Each Receipt this Period **192.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	352.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Brad Lerman
Full Name (Last, First, Middle Initial)

Mailing Address 710 Medtronic Parkway NE

City Minneapolis State MN Zip Code 55432

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

Name of Employer Medtronic Inc. Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426658

Amount of Each Receipt this Period 192.00

Memo Item

B. Jenifer Levinson
Full Name (Last, First, Middle Initial)

Mailing Address 701 8th Street NW Suite 620

City Washington State DC Zip Code 20001

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

Name of Employer Covidien Holdings Inc. Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.60

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426643

Amount of Each Receipt this Period 52.65

Memo Item

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

Mailing Address 8200 Coral Sea St NE

City Mounds View State MN Zip Code 55112-4391

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

Name of Employer Medtronic Inc. Occupation Public Rel/Comm/Media Prog Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426360

Amount of Each Receipt this Period 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 294.65

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 32 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

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

Mailing Address 710 Medtronic Parkway NE

City	State	Zip Code
Minneapolis	MN	55432

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

Name of Employer	Occupation
Medtronic Inc.	VP Regional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2016

Transaction ID : A2016-218210

Amount of Each Receipt this Period
150.00

Memo Item

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

Mailing Address 710 Medtronic Parkway NE

City	State	Zip Code
Minneapolis	MN	55432

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

Name of Employer	Occupation
Medtronic Inc.	VP Regional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2016

Transaction ID : A2016-426460

Amount of Each Receipt this Period
150.00

Memo Item

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

Mailing Address 710 Medtronic Pkwy

City	State	Zip Code
Minneapolis	MN	55432-5603

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

Name of Employer	Occupation
Medtronic Inc.	SVP Strategy and Business Plng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **768.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2016

Transaction ID : A2016-218322

Amount of Each Receipt this Period
192.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	492.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Geoffrey S Martha
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation SVP Strategy and Business Plng
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **960.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426576
 Amount of Each Receipt this Period **192.00**
 Memo Item

B. Damian May
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City Minneapolis State MN Zip Code 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426650
 Amount of Each Receipt this Period **50.00**
 Memo Item

C. Ms. Michelle A Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP/Chief Counsel Empl Law
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **320.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-218089
 Amount of Each Receipt this Period **80.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	322.00
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 34 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Ms. Michelle A Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP/Chief Counsel Empl Law
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426339
 Amount of Each Receipt this Period 80.00
 Memo Item

B. Shawn Monaghan
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City Mounds View State MN Zip Code 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP/GM SBT SHD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426476
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Mr. Mark A Musto
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City Minneapolis State MN Zip Code 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Regional Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426357
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 35 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Gary A Nelson
Full Name (Last, First, Middle Initial)

Mailing Address 710 Medtronic Pkwy

City Minneapolis State MN Zip Code 55432-5603

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

Name of Employer Medtronic Inc. Occupation VP/Risk Mgmt/Legal Admin Serv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 02 / 12 / 2016
Transaction ID : A2016-218007

Amount of Each Receipt this Period 80.00

Memo Item

B. Mr. Gary A Nelson
Full Name (Last, First, Middle Initial)

Mailing Address 710 Medtronic Pkwy

City Minneapolis State MN Zip Code 55432-5603

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

Name of Employer Medtronic Inc. Occupation VP/Risk Mgmt/Legal Admin Serv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426258

Amount of Each Receipt this Period 80.00

Memo Item

C. Mr. Mark A O'Donnell
Full Name (Last, First, Middle Initial)

Mailing Address 18000 Devonshire St

City Northridge State CA Zip Code 91325-1219

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

Name of Employer Medtronic Inc. Occupation VP Regulatory Aff Diabetes

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 02 / 12 / 2016
Transaction ID : A2016-218347

Amount of Each Receipt this Period 90.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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 36 OF 60
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Mark A O'Donnell
Full Name (Last, First, Middle Initial)

Mailing Address 18000 Devonshire St

City Northridge State CA Zip Code 91325-1219

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

Name of Employer Medtronic Inc. Occupation VP Regulatory Aff Diabetes

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426602

Amount of Each Receipt this Period 90.00

Memo Item

B. Mr. Arlen L Overvig
Full Name (Last, First, Middle Initial)

Mailing Address 8200 Coral Sea St NE

City Mounds View State MN Zip Code 55112-4391

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

Name of Employer Medtronic Inc. Occupation Prin Firmware Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt 02 / 12 / 2016
Transaction ID : A2016-218112

Amount of Each Receipt this Period 52.00

Memo Item

c. Mr. Arlen L Overvig
Full Name (Last, First, Middle Initial)

Mailing Address 8200 Coral Sea St NE

City Mounds View State MN Zip Code 55112-4391

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

Name of Employer Medtronic Inc. Occupation Prin Firmware Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426362

Amount of Each Receipt this Period 52.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	194.00
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 37 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

Full Name (Last, First, Middle Initial) A. Ms. Luann M Pendy		Date of Receipt MM / DD / YYYY 02 / 12 / 2016 Transaction ID : A2016-218284
Mailing Address 710 Medtronic Pkwy		Amount of Each Receipt this Period 192.00
City Minneapolis	State MN	Zip Code 55432-5603
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Medtronic Inc.	Occupation VP Global Quality	
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. Ms. Luann M Pendy		Date of Receipt MM / DD / YYYY 02 / 26 / 2016 Transaction ID : A2016-426538
Mailing Address 710 Medtronic Pkwy		Amount of Each Receipt this Period 192.00
City Minneapolis	State MN	Zip Code 55432-5603
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Medtronic Inc.	Occupation VP Global Quality	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00	

Full Name (Last, First, Middle Initial) C. Mr. Dominic F Presty		Date of Receipt MM / DD / YYYY 02 / 12 / 2016 Transaction ID : A2016-217994
Mailing Address 1800 Pyramid Pl Bldg D		Amount of Each Receipt this Period 88.00
City Memphis	State TN	Zip Code 38132-1703
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Medtronic Inc.	Occupation Sr Manufacturing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 352.00	

SUBTOTAL of Receipts This Page (optional).....▶	472.00
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 38 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Dominic F Presty
 Full Name (Last, First, Middle Initial)
 Mailing Address 1800 Pyramid Pl
 Bldg D
 City Memphis State TN Zip Code 38132-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation Sr Manufacturing Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **440.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426245
 Amount of Each Receipt this Period **88.00**
 Memo Item

B. Kendall A Qualls
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City Minneapolis State MN Zip Code 55482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-218446
 Amount of Each Receipt this Period **100.00**
 Memo Item

C. Kendall A Qualls
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City Minneapolis State MN Zip Code 55482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426703
 Amount of Each Receipt this Period **100.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	288.00
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 39 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Ms. Christina F Rich
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City Mounds View State MN Zip Code 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Ethics and Compliance CV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426475
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Mr. David H Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City Mounds View State MN Zip Code 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP CVG Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 02 / 12 / 2016
Transaction ID : A2016-218328
 Amount of Each Receipt this Period 135.00
 Memo Item

C. Mr. David H Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City Mounds View State MN Zip Code 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP CVG Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426583
 Amount of Each Receipt this Period 135.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	320.00
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 40 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Dean E Rustad
Full Name (Last, First, Middle Initial)

Mailing Address 8200 Coral Sea St NE

City Mounds View State MN Zip Code 55112-4391

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

Name of Employer Medtronic Inc. Occupation VP Finance CRDM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 02 / 12 / 2016
Transaction ID : A2016-218304

Amount of Each Receipt this Period 80.00

Memo Item

B. Mr. Dean E Rustad
Full Name (Last, First, Middle Initial)

Mailing Address 8200 Coral Sea St NE

City Mounds View State MN Zip Code 55112-4391

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

Name of Employer Medtronic Inc. Occupation VP Finance CRDM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426558

Amount of Each Receipt this Period 80.00

Memo Item

C. Joseph R Sapiente
Full Name (Last, First, Middle Initial)

Mailing Address 60 Middletown Avenue

City North Haven State CT Zip Code 06473

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

Name of Employer Covidien Holdings Inc. Occupation VP GLOBAL QUALITY ASSURANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 12 / 2016
Transaction ID : A2016-218369

Amount of Each Receipt this Period 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 260.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Joseph R Sapiente
 Full Name (Last, First, Middle Initial)
 Mailing Address 60 Middletown Avenue
 City North Haven State CT Zip Code 06473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Covidien Holdings Inc. Occupation VP GLOBAL QUALITY ASSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426624
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Mr. Daniel E Schaber
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City Mounds View State MN Zip Code 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Clinical Research CRDM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 02 / 12 / 2016
Transaction ID : A2016-218298
 Amount of Each Receipt this Period 135.00
 Memo Item

C. Mr. Daniel E Schaber
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City Mounds View State MN Zip Code 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Clinical Research CRDM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426552
 Amount of Each Receipt this Period 135.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	370.00
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 43 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Greg Schneider
Full Name (Last, First, Middle Initial)
Mailing Address 710 Medtronic Parkway NE
City Minneapolis State MN Zip Code 55432
FEC ID number of contributing federal political committee. **C**
Name of Employer Medtronic Inc. Occupation Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **325.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426669
Amount of Each Receipt this Period **65.00**
 Memo Item

B. Mr. Anthony B Semedo
Full Name (Last, First, Middle Initial)
Mailing Address 3850 Brickway Blvd
City Santa Rosa State CA Zip Code 95403-8223
FEC ID number of contributing federal political committee. **C**
Name of Employer Medtronic Inc. Occupation SVP and President Endo/Periph
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **400.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-218170
Amount of Each Receipt this Period **100.00**
 Memo Item

C. Mr. Anthony B Semedo
Full Name (Last, First, Middle Initial)
Mailing Address 3850 Brickway Blvd
City Santa Rosa State CA Zip Code 95403-8223
FEC ID number of contributing federal political committee. **C**
Name of Employer Medtronic Inc. Occupation SVP and President Endo/Periph
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **500.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426420
Amount of Each Receipt this Period **100.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	265.00
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 44 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Karine Semmer
Full Name (Last, First, Middle Initial)
Mailing Address 710 Medtronic Parkway NE

City Minneapolis	State MN	Zip Code 55432
---------------------	-------------	-------------------

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

Name of Employer Medtronic Inc.	Occupation Manager
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2016
Transaction ID : A2016-218419

Amount of Each Receipt this Period
 5.00

Memo Item

B. Karine Semmer
Full Name (Last, First, Middle Initial)
Mailing Address 710 Medtronic Parkway NE

City Minneapolis	State MN	Zip Code 55432
---------------------	-------------	-------------------

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

Name of Employer Medtronic Inc.	Occupation Manager
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
212.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2016
Transaction ID : A2016-426675

Amount of Each Receipt this Period
 5.00

Memo Item

C. Vipul B Sheth
Full Name (Last, First, Middle Initial)
Mailing Address 3540 Unocal Pl

City Santa Rosa	State CA	Zip Code 95403-1774
--------------------	-------------	------------------------

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

Name of Employer Medtronic Inc.	Occupation VP Global Quality Coro/RDN
------------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2016
Transaction ID : A2016-426242

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Keyna P Skeffington
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP/Deputy GCCorp - Security
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 12 / 2016
Transaction ID : A2016-218187
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Keyna P Skeffington
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP/Deputy GCCorp - Security
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426437
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Mr. James D Southwick
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Pkwy
 City Minneapolis State MN Zip Code 55432-5603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP and Deputy Counsel Intl
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 12 / 2016
Transaction ID : A2016-218190
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 48 OF 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Ms. Virginia A Suttle
 Full Name (Last, First, Middle Initial)
 Mailing Address 7000 Central Ave NE
 City Minneapolis State MN Zip Code 55432-3568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation Supply Chain Planning Dir
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426403
 Amount of Each Receipt this Period **50.00**
 Memo Item

B. Markham Swafford
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City Minneapolis State MN Zip Code 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **384.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426683
 Amount of Each Receipt this Period **192.00**
 Memo Item

C. Mr. Matthew F Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 1800 Pyramid Pl Bldg D
 City Memphis State TN Zip Code 38132-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Interventional Therapies
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **560.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-218056
 Amount of Each Receipt this Period **140.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	382.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Matthew F Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 1800 Pyramid Pl
 Bldg D
 City Memphis State TN Zip Code 38132-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Interventional Therapies
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **700.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426306
 Amount of Each Receipt this Period **140.00**
 Memo Item

B. Kana Ueda
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City Minneapolis State MN Zip Code 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426653
 Amount of Each Receipt this Period **50.00**
 Memo Item

C. Mr. Brian D Urke
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City Mounds View State MN Zip Code 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP/GM CRDM Brady
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **768.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-217989
 Amount of Each Receipt this Period **192.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	382.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Mr. Brian D Urke
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City Mounds View State MN Zip Code 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP/GM CRDM Brady
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **960.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426240
 Amount of Each Receipt this Period **192.00**
 Memo Item

B. Mr. James W Vogl
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City Mounds View State MN Zip Code 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Sales - Svc Ops CVG
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **320.00**

Date of Receipt **02 / 12 / 2016**
Transaction ID : A2016-217987
 Amount of Each Receipt this Period **80.00**
 Memo Item

C. Mr. James W Vogl
 Full Name (Last, First, Middle Initial)
 Mailing Address 8200 Coral Sea St NE
 City Mounds View State MN Zip Code 55112-4391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Sales - Svc Ops CVG
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : A2016-426238
 Amount of Each Receipt this Period **80.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	352.00
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 51 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Larry Walters
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City State Zip Code
 Minneapolis MN 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Medtronic Inc. Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 02 / 26 / 2016
Transaction ID : A2016-426678
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Mr. Jason R Weidman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3540 Unocal PI
 City State Zip Code
 Santa Rosa CA 95403-1774
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Medtronic Inc. VP/GM Coronary
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 02 / 26 / 2016
Transaction ID : A2016-426409
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Lawrence T Weiss
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 Hampshire Street
 City State Zip Code
 Mansfield MA 02048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Covidien Holdings Inc. Executive
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 346.14

Date of Receipt
 02 / 12 / 2016
Transaction ID : A2016-218365
 Amount of Each Receipt this Period
 115.38
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	215.38
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 52 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

A. Lawrence T Weiss
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 Hampshire Street
 City Mansfield State MA Zip Code 02048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Covidien Holdings Inc. Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426620
 Amount of Each Receipt this Period 115.38
 Memo Item

B. Charles G Yerich
 Full Name (Last, First, Middle Initial)
 Mailing Address 18000 Devonshire Street
 City Northridge State CA Zip Code 91325-1219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation VP Intl Marketing Diabetes
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426431
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Xiaozheng Zhang
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Medtronic Parkway NE
 City Minneapolis State MN Zip Code 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medtronic Inc. Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 26 / 2016
Transaction ID : A2016-426648
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	215.38
TOTAL This Period (last page this line number only).....▶	14263.31

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Majority Committee PAC--MC PAC

Mailing Address 213 Ashby St.

City Alexandria State VA Zip Code 22305

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2016

Transaction ID : B594640

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Cory Gardner for Senate

Mailing Address 1020 North Fairfax St. Suite 201

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution

011

Candidate Name

Cory Gardner

Category/
Type

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : B593732

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Bennet for Colorado

Mailing Address 220 I Street NE Suite 110

City Washington State DC Zip Code 20022

Purpose of Disbursement
Contribution

011

Candidate Name

Michael Bennet

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2016

Transaction ID : B594641

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

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Larson For Congress

Mailing Address 413 New Jersey Ave SE Basement Lvl

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

John B Larson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) Convention

State: CT District: 01

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : B593814

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Rick W. Allen for Congress

Mailing Address 499 S. Capitol St. SW Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Rick W Allen

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) Convention

State: GA District: 12

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : B593816

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Price for Congress

Mailing Address 499 South Capitol St. SE Suite B

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Thomas E Price

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) Convention

State: GA District: 06

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : B593817

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

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Bill Foster for Congress Committee

Mailing Address 499 S. Capitol St. SW Suite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

William G Foster

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 11

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : B593730

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Volunteers for Shimkus

Mailing Address 499 S. Capitol St. SW Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

John M Shimkus

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 15

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : B594104

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Susan Brooks

Mailing Address 1006 Pendleton Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution

011

Candidate Name

Susan Brooks

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IN District: 05

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2016

Transaction ID : B593721

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

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Joe Kennedy for Congress

Mailing Address 185 Devonshire St. Suite 601

City Boston State MA Zip Code 02110

Purpose of Disbursement
Contribution

011

Candidate Name

Joseph P Kennedy III

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MA District: 04

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : B593818

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Levin for Congress

Mailing Address 412 First Street SE Suite 100

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Sander M Levin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MI District: 09

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : B593813

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Renee Ellmers for Congress

Mailing Address 499 S. Capitol St. SW Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Renee Ellmers

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NC District: 02

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : B593794

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

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Friends of Kelly Ayotte

Mailing Address 499 S. Capitol St. SW Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name
Kelly Ayotte

Category/
Type

Office Sought: House
 Senate
 President
State: NH District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : B593792

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Steve Cohen for Congress

Mailing Address 228 2nd Street S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name
Stephen Cohen

Category/
Type

Office Sought: House
 Senate
 President
State: TN District: 09

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : B593791

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. House Conservatives Fund

Mailing Address 228 S. Washington St. Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : B593724

Amount of Each Disbursement this Period

5000.00

Memo Item

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

7000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Brady for Congress

Mailing Address 104 Hume Ave

City Alexandria State VA Zip Code 22301

Purpose of Disbursement
Contribution

011

Candidate Name

Kevin P Brady

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 08

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : B593815

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Castro for Congress

Mailing Address 220 I Street NE Suite 110

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

011

Candidate Name

Joaquin Castro

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 20

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : B594644

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Gene Green Congressional Campaign

Mailing Address PO Box 16128

City Houston State TX Zip Code 77222

Purpose of Disbursement
Contribution

011

Candidate Name

Raymond Gene Green

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 29

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : B593819

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

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Moderate Democrats PAC

Mailing Address 303 Massachusetts Avenue NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : B593722

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. New Democrat Coalition PAC

Mailing Address 700 13th Street NW #600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼ Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : B593723

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Advanced Medical Technology Assn PAC

Mailing Address 701 Pennsylvania Ave. NW Suite 800

City Washington State DC Zip Code 20004

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼ Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : B593725

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00

**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

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NAME OF COMMITTEE (In Full)
Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Republican Main Street Partnership PAC

Mailing Address 2201 Wisconsin Ave. NW #320

City Washington State DC Zip Code 20007

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : B593726

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DelBene for Congress

Mailing Address 499 S. Capitol St. SW Suite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WA District: 01

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : B593795

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

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

6000.00

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

46000.00