

**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)

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

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

Full Name (Last, First, Middle Initial)  
A. NorthStar Leadership PAC

Mailing Address P.O. Box 4965

City St. Paul State MN Zip Code 55104

Purpose of Disbursement  
O-2005 Fed Multi-cand. PAC US

Candidate Name

Office Sought: House Senate President  
State: MN District

Disbursement For: 2005  
Primary General  
 Other (specify) ▼  
Not Applicable

011  
Category/  
Type

Transaction ID: B116362  
Date of Disbursement

05 / 19 / 2005

Amount of Each Disbursement this Period

9000.00

Full Name (Last, First, Middle Initial)  
B. Richard Burr Committee

Mailing Address P.O. Box 5628

City Winston-Salem State NC Zip Code 27113

Purpose of Disbursement  
P-2010 U.S. Senate NC

Candidate Name  
Richard Burr

Office Sought: House Senate President  
State: NC District

Disbursement For: 2010  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: B116363  
Date of Disbursement

05 / 19 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)  
C. Boyd for Congress

Mailing Address P.O. Box 15703

City Tallahassee State FL Zip Code 32317

Purpose of Disbursement  
P-2008 U.S. House 02 FL

Candidate Name  
F. A. Boyd

Office Sought:  House Senate President  
State: FL District 02

Disbursement For: 2008  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: B116363  
Date of Disbursement

05 / 19 / 2005

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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