

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** C00311878  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 04 01 2008 through 04 30 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Gary Ellis

Signature of Treasurer Electronically Filed by Gary Ellis Date 05 16 2008

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									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Medtronic Inc. Medical Technology Fund

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		185919.45
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	179653.45									
(c) Total Receipts (from Line 19) .....	15074.76	60826.76								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	194728.21	246746.21								
7. Total Disbursements (from Line 31) .....	10000.00	62018.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	184728.21	184728.21								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	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. Medical Technology Fund

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	7884.84	21442.62
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	7189.92	39384.14
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	15074.76	60826.76
(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) .....	15074.76	60826.76
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 Transfer (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)) .....	15074.76	60826.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	15074.76	60826.76

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	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.....	10000.00	59500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	18.00
(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	18.00
29. Other Disbursements.....	0.00	2500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	10000.00	62018.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10000.00	62018.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	15074.76	60826.76
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	18.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15074.76	60808.76
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 / 45
	<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. Medical Technology Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Ross A Allen		Date of Receipt
	Mailing Address 710 Medtronic Parkway		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 0 4 / 2 0 0 8
	City	State	Zip Code
	Minneapolis	MN	55432
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Medtronic Inc.		Occupation Medtronic VP	<b>Transaction ID:</b> A2008-771597
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 291.34	<input type="text"/> 41.62

<b>B.</b>	Full Name (Last, First, Middle Initial) Ross A Allen		Date of Receipt
	Mailing Address 710 Medtronic Parkway		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 1 8 / 2 0 0 8
	City	State	Zip Code
	Minneapolis	MN	55432
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Medtronic Inc.		Occupation Medtronic VP	<b>Transaction ID:</b> A2008-796767
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 332.96	<input type="text"/> 41.62

<b>C.</b>	Full Name (Last, First, Middle Initial) Susan Alpert		Date of Receipt
	Mailing Address 710 Medtronic Parkway		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 0 4 / 2 0 0 8
	City	State	Zip Code
	Minneapolis	MN	55432
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Medtronic Inc.		Occupation Sr VP/Pres	<b>Transaction ID:</b> A2008-771532
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 1346.10	<input type="text"/> 192.30

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 275.54
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 45  
(check only one)

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

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

**A.**

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Sr VP/Pres

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1538.40

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796702

Amount of Each Receipt this Period  
192.30

**B.**

Full Name (Last, First, Middle Initial)  
Neil P Ayotte

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771809

Amount of Each Receipt this Period  
38.00

**C.**

Full Name (Last, First, Middle Initial)  
Neil P Ayotte

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796979

Amount of Each Receipt this Period  
38.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **268.30**

**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: PAGE 8 / 45  
(check only one)

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

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

**A.**

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 532.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771617

Amount of Each Receipt this Period  
76.00

**B.**

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796787

Amount of Each Receipt this Period  
76.00

**C.**

Full Name (Last, First, Middle Initial)  
Dale F Beumer

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 532.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771525

Amount of Each Receipt this Period  
76.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **228.00**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 45  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Medtronic Inc. Medical Technology Fund

**A.**

Full Name (Last, First, Middle Initial)  
Dale F Beumer

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt 04 / 18 / 2008

**Transaction ID:** A2008-796695

Amount of Each Receipt this Period 76.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert H Blankemeyer

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt 04 / 04 / 2008

**Transaction ID:** A2008-771560

Amount of Each Receipt this Period 38.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert H Blankemeyer

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt 04 / 18 / 2008

**Transaction ID:** A2008-796730

Amount of Each Receipt this Period 38.00

**SUBTOTAL** of Receipts This Page (optional) ..... 152.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Gerard Bussell	Date of Receipt MM / DD / YYYY 04 / 04 / 2008
	Mailing Address 710 Medtronic Parkway	<b>Transaction ID:</b> A2008-771833
	City State Zip Code Minneapolis MN 33606	Amount of Each Receipt this Period 39.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Medtronic Inc. Medtronic VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Gerard Bussell	Date of Receipt MM / DD / YYYY 04 / 18 / 2008
	Mailing Address 710 Medtronic Parkway	<b>Transaction ID:</b> A2008-797003
	City State Zip Code Minneapolis MN 33606	Amount of Each Receipt this Period 39.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Medtronic Inc. Medtronic VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Leondias Butcher	Date of Receipt MM / DD / YYYY 04 / 04 / 2008
	Mailing Address 710 Medtronic Parkway	<b>Transaction ID:</b> A2008-771632
	City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Medtronic Inc. Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	116.00
<b>TOTAL</b> 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 11 / 45  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Leondias Butcher

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

**Transaction ID:** A2008-796802

Amount of Each Receipt this Period  
38.00

**B.**

Full Name (Last, First, Middle Initial)  
Mary C Cade

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Medtronic VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

**Transaction ID:** A2008-771530

Amount of Each Receipt this Period  
38.00

**C.**

Full Name (Last, First, Middle Initial)  
Mary C Cade

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Medtronic VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

**Transaction ID:** A2008-796700

Amount of Each Receipt this Period  
38.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **114.00**

**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 12 / 45  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Medtronic Inc. Medical Technology Fund

**A.**

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Sr VP/Pres

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1344.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771643

Amount of Each Receipt this Period  
192.00

**B.**

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Sr VP/Pres

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1536.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796813

Amount of Each Receipt this Period  
192.00

**C.**

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 242.34

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771519

Amount of Each Receipt this Period  
34.62

**SUBTOTAL** of Receipts This Page (optional) ..... ► **418.62**

**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 / 45
	<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. Medical Technology Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert E Clark	Date of Receipt MM / DD / YYYY 04 / 18 / 2008
	Mailing Address 710 Medtronic Parkway	<b>Transaction ID:</b> A2008-796689
	City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 34.62
	FEC ID number of contributing federal political committee. C	
	Name of Employer Medtronic Inc. Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 276.96	

<b>B.</b>	Full Name (Last, First, Middle Initial) Vickie L Conley	Date of Receipt MM / DD / YYYY 04 / 04 / 2008
	Mailing Address 710 Medtronic Parkway	<b>Transaction ID:</b> A2008-771914
	City State Zip Code Minneapolis MN 33606	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Medtronic Inc. Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Vickie L Conley	Date of Receipt MM / DD / YYYY 04 / 18 / 2008
	Mailing Address 710 Medtronic Parkway	<b>Transaction ID:</b> A2008-797083
	City State Zip Code Minneapolis MN 33606	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Medtronic Inc. Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	234.62
<b>TOTAL</b> 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 14 / 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael F DeMane		Date of Receipt
	Mailing Address 710 Medtronic Parkway		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 0 4 / 2 0 0 8
	City	State	Zip Code
	Minneapolis	MN	55432
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2008-771642
Name of Employer Medtronic Inc.		Occupation Sr VP/Pres	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 192.00
		<input type="text"/> 1344.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael F DeMane		Date of Receipt
	Mailing Address 710 Medtronic Parkway		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 1 8 / 2 0 0 8
	City	State	Zip Code
	Minneapolis	MN	55432
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2008-796812
Name of Employer Medtronic Inc.		Occupation Sr VP/Pres	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 192.00
		<input type="text"/> 1536.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Machelle Dunavant Shields		Date of Receipt
	Mailing Address 710 Medtronic Parkway		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 0 4 / 2 0 0 8
	City	State	Zip Code
	Minneapolis	MN	33606
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2008-771901
Name of Employer Medtronic Inc.		Occupation Medtronic VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 38.46
		<input type="text"/> 269.22	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 422.46
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 45  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Machelle Dunavant Shields

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 33606

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 307.68

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-797070

Amount of Each Receipt this Period  
38.46

**B.**

Full Name (Last, First, Middle Initial)  
Gary L Ellis

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Sr VP/Pres

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1351.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771600

Amount of Each Receipt this Period  
193.00

**C.**

Full Name (Last, First, Middle Initial)  
Gary L Ellis

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Sr VP/Pres

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1544.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796770

Amount of Each Receipt this Period  
193.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **424.46**

**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 16 / 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Leroy P Erickson

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771637

Amount of Each Receipt this Period  
38.00

**B.**

Full Name (Last, First, Middle Initial)  
Leroy P Erickson

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796807

Amount of Each Receipt this Period  
38.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey A Farkas

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771537

Amount of Each Receipt this Period  
38.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **114.00**

**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 17 / 45  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Jeffrey A Farkas

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796707

Amount of Each Receipt this Period  
38.00

**B.**

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 532.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771565

Amount of Each Receipt this Period  
76.00

**C.**

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796735

Amount of Each Receipt this Period  
76.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 190.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 45  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Christian R Hadland

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771535

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Christian R Hadland

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796705

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth N Hammack

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771546

Amount of Each Receipt this Period  
40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 140.00

**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 19 / 45  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Elizabeth N Hammack

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Medtronic VP

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

**Transaction ID:** A2008-796716

Amount of Each Receipt this Period  
40.00

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation COB/CEO/VC

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1344.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

**Transaction ID:** A2008-771533

Amount of Each Receipt this Period  
192.00

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation COB/CEO/VC

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1536.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

**Transaction ID:** A2008-796703

Amount of Each Receipt this Period  
192.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **424.00**

**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 20 / 45

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
William J Hooper

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 280.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A2008-771634

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)  
William J Hooper

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Transaction ID: A2008-796804

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)  
Kevin R Hykes

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 33606

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A2008-771888

Amount of Each Receipt this Period

30.00

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

110.00

**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 21 / 45

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Kevin R Hykes

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 33606

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Transaction ID: A2008-797057

Amount of Each Receipt this Period  
30.00

**B.**

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 266.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A2008-771764

Amount of Each Receipt this Period  
38.00

**C.**

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

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

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Transaction ID: A2008-796934

Amount of Each Receipt this Period  
38.00

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

106.00

**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 22 / 45  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Charles M Kolb

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 33606

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

Name of Employer Medtronic Inc. Occupation Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 269.22

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771908

Amount of Each Receipt this Period  
38.46

**B.** Full Name (Last, First, Middle Initial)  
Charles M Kolb

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 33606

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

Name of Employer Medtronic Inc. Occupation Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 307.68

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-797077

Amount of Each Receipt this Period  
38.46

**C.** Full Name (Last, First, Middle Initial)  
David G Martin

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771931

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **126.92**

**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 23 / 45  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 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. Medical Technology Fund

**A.**

Full Name (Last, First, Middle Initial)  
David G Martin

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-797100

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Jim McDermid

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771572

Amount of Each Receipt this Period  
38.00

**C.**

Full Name (Last, First, Middle Initial)  
Jim McDermid

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796742

Amount of Each Receipt this Period  
38.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **126.00**

**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 24 / 45  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	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. Medical Technology Fund

**A.**

Full Name (Last, First, Middle Initial)  
Gregory A Meehan

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 33606

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

Name of Employer Medtronic Inc. Occupation Medtronic VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 269.50

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

**Transaction ID:** A2008-771867

Amount of Each Receipt this Period  
38.50

**B.**

Full Name (Last, First, Middle Initial)  
Gregory A Meehan

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 33606

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

Name of Employer Medtronic Inc. Occupation Medtronic VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 308.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

**Transaction ID:** A2008-797036

Amount of Each Receipt this Period  
38.50

**C.**

Full Name (Last, First, Middle Initial)  
David F Miller

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Medtronic VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 805.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

**Transaction ID:** A2008-771556

Amount of Each Receipt this Period  
115.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **192.00**

**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 25 / 45
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) David F Miller		Date of Receipt MM / DD / YYYY 04 / 18 / 2008		
	Mailing Address 710 Medtronic Parkway		<b>Transaction ID:</b> A2008-796726		
	City Minneapolis	State MN	Zip Code 55432	Amount of Each Receipt this Period 115.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Medtronic Inc.	Occupation Medtronic VP	Aggregate Year-to-Date 920.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Michelle Miller		Date of Receipt MM / DD / YYYY 04 / 04 / 2008		
	Mailing Address 710 Medtronic Parkway		<b>Transaction ID:</b> A2008-771780		
	City Minneapolis	State MN	Zip Code 55432	Amount of Each Receipt this Period 39.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Medtronic Inc.	Occupation VP Employment Law	Aggregate Year-to-Date 273.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Michelle Miller		Date of Receipt MM / DD / YYYY 04 / 18 / 2008		
	Mailing Address 710 Medtronic Parkway		<b>Transaction ID:</b> A2008-796950		
	City Minneapolis	State MN	Zip Code 55432	Amount of Each Receipt this Period 39.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Medtronic Inc.	Occupation VP Employment Law	Aggregate Year-to-Date 312.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	193.00
<b>TOTAL</b> 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 26 / 45  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Yvonne Moore

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771520

Amount of Each Receipt this Period  
38.00

**B.**

Full Name (Last, First, Middle Initial)  
Yvonne Moore

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796690

Amount of Each Receipt this Period  
38.00

**C.**

Full Name (Last, First, Middle Initial)  
Sydney J Mouer

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 33606

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 ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771909

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **126.00**

**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 27 / 45  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Sydney J Mouer

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 33606

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 ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-797078

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
David A Ness

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 399.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771611

Amount of Each Receipt this Period  
57.00

**C.**

Full Name (Last, First, Middle Initial)  
David A Ness

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 456.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796781

Amount of Each Receipt this Period  
57.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **164.00**

**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 28 / 45  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Michael J Nicoletta

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Medtronic VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771528

Amount of Each Receipt this Period  
38.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael J Nicoletta

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Medtronic VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796698

Amount of Each Receipt this Period  
38.00

**C.**

Full Name (Last, First, Middle Initial)  
Christopher J O'Connell

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Sr VP/Pres

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1344.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771531

Amount of Each Receipt this Period  
192.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **268.00**

**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 29 / 45  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Christopher J O'Connell

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Sr VP/Pres

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1536.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	8	/	2	0	0	8

**Transaction ID:** A2008-796701

Amount of Each Receipt this Period  
192.00

**B.** Full Name (Last, First, Middle Initial)  
Stephen N Oesterle

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Sr VP/Pres

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1344.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	4	/	2	0	0	8

**Transaction ID:** A2008-771580

Amount of Each Receipt this Period  
192.00

**C.** Full Name (Last, First, Middle Initial)  
Stephen N Oesterle

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Sr VP/Pres

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1536.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	8	/	2	0	0	8

**Transaction ID:** A2008-796750

Amount of Each Receipt this Period  
192.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **576.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 45

(check only one)

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

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

**A.**

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 33606

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

Name of Employer Occupation  
Medtronic Inc. Principal

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 364.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A2008-771820

Amount of Each Receipt this Period

52.00

**B.**

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 33606

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

Name of Employer Occupation  
Medtronic Inc. Principal

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 416.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Transaction ID: A2008-796990

Amount of Each Receipt this Period

52.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert W Perry

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 532.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A2008-771640

Amount of Each Receipt this Period

76.00

**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: PAGE 31 / 45

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 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. Medical Technology Fund

**A.**

Full Name (Last, First, Middle Initial)  
Robert W Perry

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 608.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Transaction ID: A2008-796810

Amount of Each Receipt this Period  
76.00

**B.**

Full Name (Last, First, Middle Initial)  
Dominic F Presty

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Director

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 266.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A2008-771554

Amount of Each Receipt this Period  
38.00

**C.**

Full Name (Last, First, Middle Initial)  
Dominic F Presty

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Director

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

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Transaction ID: A2008-796724

Amount of Each Receipt this Period  
38.00

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

152.00

**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 32 / 45  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

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

**A.** Full Name (Last, First, Middle Initial)  
Pamela M Reitz-Bouren  
Mailing Address 710 Medtronic Parkway  
City State Zip Code  
Minneapolis MN 55432  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Medtronic Inc. Occupation Medtronic VP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 266.00  
Date of Receipt MM / DD / YYYY  
04 / 04 / 2008  
Transaction ID: A2008-771807  
Amount of Each Receipt this Period 38.00

**B.** Full Name (Last, First, Middle Initial)  
Pamela M Reitz-Bouren  
Mailing Address 710 Medtronic Parkway  
City State Zip Code  
Minneapolis MN 55432  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Medtronic Inc. Occupation Medtronic VP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 304.00  
Date of Receipt MM / DD / YYYY  
04 / 18 / 2008  
Transaction ID: A2008-796977  
Amount of Each Receipt this Period 38.00

**C.** Full Name (Last, First, Middle Initial)  
Herbert F Riband  
Mailing Address 710 Medtronic Parkway  
City State Zip Code  
Minneapolis MN 55432  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Medtronic Inc. Occupation Medtronic VP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 532.00  
Date of Receipt MM / DD / YYYY  
04 / 04 / 2008  
Transaction ID: A2008-771767  
Amount of Each Receipt this Period 76.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 152.00  
**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 33 / 45  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Herbert F Riband  
Mailing Address 710 Medtronic Parkway  
City Minneapolis State MN Zip Code 55432  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Medtronic Inc. Occupation Medtronic VP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 608.00  
Date of Receipt 04 / 18 / 2008  
Transaction ID: A2008-796937  
Amount of Each Receipt this Period 76.00

**B.** Full Name (Last, First, Middle Initial)  
John L Ross  
Mailing Address 710 Medtronic Parkway  
City Minneapolis State MN Zip Code 55432  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Medtronic Inc. Occupation Medtronic VP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 399.00  
Date of Receipt 04 / 04 / 2008  
Transaction ID: A2008-771613  
Amount of Each Receipt this Period 57.00

**C.** Full Name (Last, First, Middle Initial)  
John L Ross  
Mailing Address 710 Medtronic Parkway  
City Minneapolis State MN Zip Code 55432  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Medtronic Inc. Occupation Medtronic VP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 456.00  
Date of Receipt 04 / 18 / 2008  
Transaction ID: A2008-796783  
Amount of Each Receipt this Period 57.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 / 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Dean E Rustad	Date of Receipt MM / DD / YYYY 04 / 04 / 2008
	Mailing Address 710 Medtronic Parkway	<b>Transaction ID:</b> A2008-771602
	City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Medtronic Inc. Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 266.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Dean E Rustad	Date of Receipt MM / DD / YYYY 04 / 18 / 2008
	Mailing Address 710 Medtronic Parkway	<b>Transaction ID:</b> A2008-796772
	City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Medtronic Inc. Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 304.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Daniel E Schaber	Date of Receipt MM / DD / YYYY 04 / 04 / 2008
	Mailing Address 710 Medtronic Parkway	<b>Transaction ID:</b> A2008-771647
	City State Zip Code Minneapolis MN 55432	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Medtronic Inc. Occupation Medtronic VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 266.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>114.00</b>
<b>TOTAL</b> 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 35 / 45  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Daniel E Schaber

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796817

Amount of Each Receipt this Period  
38.00

**B.**

Full Name (Last, First, Middle Initial)  
Rachael M Scherer

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771567

Amount of Each Receipt this Period  
38.00

**C.**

Full Name (Last, First, Middle Initial)  
Rachael M Scherer

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796737

Amount of Each Receipt this Period  
38.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 114.00

**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 36 / 45  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Medtronic Inc. Medical Technology Fund

**A.**

Full Name (Last, First, Middle Initial)  
Rajiv V Shah

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

**Transaction ID:** A2008-771576

Amount of Each Receipt this Period  
38.00

**B.**

Full Name (Last, First, Middle Initial)  
Rajiv V Shah

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

**Transaction ID:** A2008-796746

Amount of Each Receipt this Period  
38.00

**C.**

Full Name (Last, First, Middle Initial)  
Ron Shettler

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Medtronic Inc. Occupation Medtronic VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

**Transaction ID:** A2008-771623

Amount of Each Receipt this Period  
60.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 136.00

**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 37 / 45  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ron Shettler</p> <p>Mailing Address 710 Medtronic Parkway</p> <p>City State Zip Code Minneapolis MN 55432</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Medtronic Inc. Medtronic VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">480.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">04 / 18 / 2008</span></p> <p><b>Transaction ID:</b> A2008-796793</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">60.00</span></p>
---	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Peter B Slone</p> <p>Mailing Address 710 Medtronic Parkway</p> <p>City State Zip Code Minneapolis MN 55432</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Medtronic Inc. Medtronic VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">805.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">04 / 04 / 2008</span></p> <p><b>Transaction ID:</b> A2008-771543</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">115.00</span></p>
--	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Peter B Slone</p> <p>Mailing Address 710 Medtronic Parkway</p> <p>City State Zip Code Minneapolis MN 55432</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Medtronic Inc. Medtronic VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">920.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">04 / 18 / 2008</span></p> <p><b>Transaction ID:</b> A2008-796713</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">115.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">290.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 45

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Marshall S Stanton

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 532.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A2008-771571

Amount of Each Receipt this Period  
76.00

**B.**

Full Name (Last, First, Middle Initial)  
Marshall S Stanton

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 608.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Transaction ID: A2008-796741

Amount of Each Receipt this Period  
76.00

**C.**

Full Name (Last, First, Middle Initial)  
Catherine M Szyman

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A2008-771598

Amount of Each Receipt this Period  
50.00

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

202.00

**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 39 / 45

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Catherine M Szyman

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	0	8

Transaction ID: A2008-796768

Amount of Each Receipt this Period

50.00
-------

**B.**

Full Name (Last, First, Middle Initial)  
Brian D Urke

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 266.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	0	8

Transaction ID: A2008-771536

Amount of Each Receipt this Period

38.00
-------

**C.**

Full Name (Last, First, Middle Initial)  
Brian D Urke

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	0	8

Transaction ID: A2008-796706

Amount of Each Receipt this Period

38.00
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**SUBTOTAL** of Receipts This Page (optional) ..... ▶

126.00

**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 40 / 45

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Scott R Ward

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Sr VP/Pres

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1344.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A2008-771524

Amount of Each Receipt this Period

192.00

**B.**

Full Name (Last, First, Middle Initial)  
Scott R Ward

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Sr VP/Pres

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1536.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Transaction ID: A2008-796694

Amount of Each Receipt this Period

192.00

**C.**

Full Name (Last, First, Middle Initial)  
Jason Weidman

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 215.36

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Transaction ID: A2008-797108

Amount of Each Receipt this Period

26.92

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

410.92

**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 41 / 45  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 532.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771539

Amount of Each Receipt this Period  
76.00

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

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796709

Amount of Each Receipt this Period  
76.00

**C.** Full Name (Last, First, Middle Initial)  
Henry K Woo

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771618

Amount of Each Receipt this Period  
38.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **190.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 45  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Henry K Woo

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796788

Amount of Each Receipt this Period  
38.00

**B.**

Full Name (Last, First, Middle Initial)  
Winifred C Wu

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2008

**Transaction ID:** A2008-771648

Amount of Each Receipt this Period  
40.00

**C.**

Full Name (Last, First, Middle Initial)  
Winifred C Wu

Mailing Address 710 Medtronic Parkway

City State Zip Code  
Minneapolis MN 55432

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

Name of Employer Occupation  
Medtronic Inc. Medtronic VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2008

**Transaction ID:** A2008-796818

Amount of Each Receipt this Period  
40.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>118.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>7884.84</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) The New Democrat Coalition PAC</p> <p>Mailing Address 607 14th Street NW Suite 800</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: US District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p><b>Transaction ID:</b> B211748 <b>Date of Disbursement</b> 04 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Kent Conrad</p> <p>Mailing Address P.O. Box 812</p> <p>City Bismarck State ND Zip Code 58502</p> <p>Purpose of Disbursement Contribution Candidate Name Kent G Conrad</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B211749 <b>Date of Disbursement</b> 04 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) John Lewis for Congress</p> <p>Mailing Address P.O. Box 636</p> <p>City Annandale State VA Zip Code 22003</p> <p>Purpose of Disbursement Contribution Candidate Name John Lewis</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 05</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B212474 <b>Date of Disbursement</b> 04 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>

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

9000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 45

<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

A.	Full Name (Last, First, Middle Initial) Sam Johnson for Congress		Transaction ID: B212519	
	Mailing Address P.O. Box 860096		Date of Disbursement 04 / 15 / 2008	
	City Plano	State TX	Zip Code 75086	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution		011	
	Candidate Name Sam Johnson		Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: TX	District: 03		

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

1000.00

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

10000.00

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.