

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Medtronic Inc. PAC

ADDRESS (number and street)

950 F Street NW Suite 500

Check if different
than previously
reported. (ACC)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00311878

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☒ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ 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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2017

through

M M M / D D D / Y Y Y Y Y Y
12 31 2017

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

Parkhill, Karen, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Parkhill, Karen, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
01 29 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Medtronic Inc. PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2017		262293.90
(b) Cash on Hand at Beginning of Reporting Period.....	261915.40	
(c) Total Receipts (from Line 19)	157818.62	320940.12
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	419734.02	583234.02
7. Total Disbursements (from Line 31).....	91500.00	255000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	328234.02	328234.02
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY 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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Medtronic Inc. PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
07	/	01	/	2017

To:

M M	/	D D	/	Y Y Y Y Y Y
12	/	31	/	2017

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	139050.69	237373.76
(ii) Unitemized	15767.93	80566.36
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	154818.62	317940.12
(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)	154818.62	317940.12
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.....	3000.00	3000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	157818.62	320940.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	157818.62	320940.12

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	91500.00	255000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	91500.00	255000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	91500.00	255000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	154818.62	317940.12
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	154818.62	317940.12
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: PAGE 6 OF 1014

(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Albert, Philip, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534615

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Albert, Philip, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536727

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Albert, Philip, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857163

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID :

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

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 8 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Albert, Philip, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834357

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Albert, Philip, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877651

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Albert, Philip, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878087

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Amsbaugh, Pamela, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888743

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Amsbaugh, Pamela, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889226

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Amsbaugh, Pamela, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156543

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

60.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Amsbaugh, Pamela, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157108

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Amsbaugh, Pamela, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157731

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Amsbaugh, Pamela, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157553

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

60.00

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

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

FOR LINE NUMBER: PAGE 11 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Amsbaugh, Pamela, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571294

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Amsbaugh, Pamela, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534599

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Amsbaugh, Pamela, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536711

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

60.00

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

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

FOR LINE NUMBER: PAGE 12 OF 1014
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Amsbaugh, Pamela, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857147

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Amsbaugh, Pamela, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834341

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Amsbaugh, Pamela, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877635

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

60.00

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

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

FOR LINE NUMBER: PAGE 13 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Amsbaugh, Pamela, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Prin Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878071

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Anderson, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Facilities Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888774

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Anderson, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Facilities Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888921

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

120.00

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

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Anderson, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Facilities Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156574

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Anderson, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Facilities Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157139

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Anderson, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Facilities Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157761

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Anderson, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Facilities Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157583

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Anderson, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Facilities Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571557

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Anderson, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Facilities Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534628

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 16 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Anderson, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Facilities Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536740

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Anderson, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Facilities Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857176

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Anderson, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Facilities Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834370

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

150.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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A. Anderson, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Facilities Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877664

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Anderson, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Facilities Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878100

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Anderton, Brian, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534493

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

110.00

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Anderton, Brian, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536624

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Anderton, Brian, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857297

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Anderton, Brian, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834120

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Anderton, Brian, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877319

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Anderton, Brian, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877786

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Arnold, Amanda, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Gbl Ldr/Talent Dev Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888531

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

45.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Arnold, Amanda, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Gbl Ldr/Talent Dev Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889285

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Arnold, Amanda, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Gbl Ldr/Talent Dev Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156661

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Arnold, Amanda, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Gbl Ldr/Talent Dev Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156776

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 21 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Arnold, Amanda, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Gbl Ldr/Talent Dev Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157783

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Arnold, Amanda, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Gbl Ldr/Talent Dev Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157222

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Arnold, Amanda, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Gbl Ldr/Talent Dev Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571315

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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

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

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FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Arnold, Amanda, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Gbl Ldr/Talent Dev Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534453

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Arnold, Amanda, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Gbl Ldr/Talent Dev Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536584

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Arnold, Amanda, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Gbl Ldr/Talent Dev Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857258

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 23 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Arnold, Amanda, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Gbl Ldr/Talent Dev Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834144

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Arnold, Amanda, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Gbl Ldr/Talent Dev Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877343

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Arnold, Amanda, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Gbl Ldr/Talent Dev Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877747

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 24 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ashton, Chad, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888586

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ashton, Chad, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888990

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ashton, Chad, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156716

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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 25 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ashton, Chad, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156830

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ashton, Chad, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157837

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ashton, Chad, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157276

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ashton, Chad, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571369

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ashton, Chad, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534519

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ashton, Chad, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536638

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ashton, Chad, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857311

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ashton, Chad, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834162

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ashton, Chad, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877300

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER:
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PAGE 28 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ashton, Chad, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877800

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Asmussen, Brian, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534494

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Asmussen, Brian, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536625

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

45.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 1014

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Asmussen, Brian, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Strategic Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857298

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Asmussen, Brian, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834121

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Asmussen, Brian, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877320

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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 30 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Asmussen, Brian, T.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877787

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Audet, Sarah, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888787

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Audet, Sarah, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888935

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

40.00

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

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

FOR LINE NUMBER: PAGE 31 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Audet, Sarah, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156588

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Audet, Sarah, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157152

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Audet, Sarah, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2158040

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

45.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Audet, Sarah, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157596

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Audet, Sarah, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571569

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Audet, Sarah, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534641

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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 33 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Audet, Sarah, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536752

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Audet, Sarah, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857189

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Audet, Sarah, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834383

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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

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

FOR LINE NUMBER: PAGE 34 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Audet, Sarah, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877677

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Audet, Sarah, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878113

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ayotte, Neil, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Legal/Integ Lead AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888517

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

155.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ayotte, Neil, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal/Integ Lead AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889215

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ayotte, Neil, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal/Integ Lead AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156532

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ayotte, Neil, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal/Integ Lead AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157097

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

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

375.00

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

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

FOR LINE NUMBER: PAGE 36 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ayotte, Neil, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal/Integ Lead AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157720

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ayotte, Neil, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal/Integ Lead AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2375.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157542

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ayotte, Neil, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal/Integ Lead AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571283

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

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

375.00

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

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

FOR LINE NUMBER: PAGE 37 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ayotte, Neil, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal/Integ Lead AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534588

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ayotte, Neil, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal/Integ Lead AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536700

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ayotte, Neil, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal/Integ Lead AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857136

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

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

375.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ayotte, Neil, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Legal/Integ Lead AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2885.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834331

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ayotte, Neil, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Legal/Integ Lead AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2895.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877625

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ayotte, Neil, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Legal/Integ Lead AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2905.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2878061

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

30.00

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 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bakeberg, Robbie, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 20 / 2017

Transaction ID : A2017-2534627

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bakeberg, Robbie, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 03 / 2017

Transaction ID : A2017-2536739

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bakeberg, Robbie, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 17 / 2017

Transaction ID : A2017-2857175

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bakeberg, Robbie, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834369

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bakeberg, Robbie, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877663

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bakeberg, Robbie, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878099

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ballard, Rodney, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Product Development Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534633

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ballard, Rodney, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Product Development Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536745

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ballard, Rodney, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Product Development Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857181

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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

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

FOR LINE NUMBER: PAGE 42 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ballard, Rodney, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Product Development Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834375

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ballard, Rodney, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Product Development Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877669

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ballard, Rodney, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Product Development Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878105

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barber, Renee, D, ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Administration Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

07 / 14 / 2017

Transaction ID : A2017-1888766

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barber, Renee, D, ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Administration Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

07 / 28 / 2017

Transaction ID : A2017-1888913

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Barber, Renee, D, ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Administration Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156566

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barber, Renee, D, ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Administration Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157131

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barber, Renee, D, ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Administration Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157754

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Barber, Renee, D, ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Administration Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157576

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

150.00

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

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 45 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barber, Renee, D, ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Administration Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571550

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barber, Renee, D, ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Administration Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534621

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Barber, Renee, D, ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Administration Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536733

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barber, Renee, D, ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Administration Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857169

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barber, Renee, D, ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Administration Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834363

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Barber, Renee, D, ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Administration Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877657

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

150.00

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

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

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

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barber, Renee, D, ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Administration Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878093

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barry, Christine, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534532

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Barry, Christine, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536811

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

70.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barry, Christine, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856956

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barry, Christine, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834175

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Barry, Christine, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877375

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 49 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barry, Christine, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877813

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bartlett, Douglas, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.44

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888648

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bartlett, Douglas, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

576.90

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889126

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

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

86.92

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

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

FOR LINE NUMBER: PAGE 50 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bartlett, Douglas, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Patient Mon MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156317

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bartlett, Douglas, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Patient Mon MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156889

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bartlett, Douglas, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Patient Mon MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

692.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157896

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

115.38

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

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bartlett, Douglas, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Patient Mon MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157335

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bartlett, Douglas, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Patient Mon MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571427

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bartlett, Douglas, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Patient Mon MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

807.66

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534670

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

115.38

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

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

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

FOR LINE NUMBER: PAGE 52 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bartlett, Douglas, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Patient Mon MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536856

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bartlett, Douglas, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Patient Mon MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

884.58

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857002

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bartlett, Douglas, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Patient Mon MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

923.04

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834220

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

115.38

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 1014

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bartlett, Douglas, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Patient Mon MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877419

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bartlett, Douglas, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Patient Mon MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877857

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Barton, Stanley, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Sales Rep Government

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2878133

Amount of Each Receipt this Period

8.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

84.92

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 54 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Battaglia, Jessica, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888723

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Battaglia, Jessica, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889004

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Battaglia, Jessica, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156393

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

150.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 55 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Battaglia, Jessica, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M	D D	Y Y Y Y
08	25	2017

Transaction ID : A2017-2156963

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Battaglia, Jessica, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M	D D	Y Y Y Y
09	08	2017

Transaction ID : A2017-2157970

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Battaglia, Jessica, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M	D D	Y Y Y Y
09	22	2017

Transaction ID : A2017-2157409

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

150.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 56 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Battaglia, Jessica, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571500

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Battaglia, Jessica, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534743

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Battaglia, Jessica, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536494

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 57 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Battaglia, Jessica, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857076

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Battaglia, Jessica, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834023

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Battaglia, Jessica, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877493

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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 58 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Battaglia, Jessica, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877930

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Becker, Geoffrey, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888679

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Becker, Geoffrey, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888860

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 59 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Becker, Geoffrey, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156348

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Becker, Geoffrey, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156919

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Becker, Geoffrey, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157926

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

225.00

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 60 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Becker, Geoffrey, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157365

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Becker, Geoffrey, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571457

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Becker, Geoffrey, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534700

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

225.00

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

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

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FOR LINE NUMBER: PAGE 61 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Becker, Geoffrey, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536886

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Becker, Geoffrey, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1725.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857032

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Becker, Geoffrey, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834250

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

225.00

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 62 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Becker, Geoffrey, P, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877449

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Becker, Geoffrey, P, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877886

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Benson, Kristyn, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888455

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

190.00

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

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

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A. Benson, Kristyn, M, ,

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MN

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889151

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Benson, Kristyn, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156468

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Benson, Kristyn, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

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MN

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55432

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157034

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

120.00

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

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FOR LINE NUMBER: PAGE 64 OF 1014

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157657

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Benson, Kristyn, M, ,

Mailing Address 710 Medtronic Parkway NE

City
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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157480

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Benson, Kristyn, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

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MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571223

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

120.00

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

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534814

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Benson, Kristyn, M, ,

Mailing Address 710 Medtronic Parkway NE

City
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FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536563

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Benson, Kristyn, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856911

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

120.00

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

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Detailed Summary Page

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A. Benson, Kristyn, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834092

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Benson, Kristyn, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877563

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Benson, Kristyn, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877999

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

120.00

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

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FOR LINE NUMBER: PAGE 67 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Blackwell, Stanley, D, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Talent Acquisition Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888805

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Blackwell, Stanley, D, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Talent Acquisition Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888953

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Blackwell, Stanley, D, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Talent Acquisition Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156606

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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

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

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FOR LINE NUMBER: PAGE 68 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Blackwell, Stanley, D, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Talent Acquisition Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157170

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Blackwell, Stanley, D, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Talent Acquisition Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2158058

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Blackwell, Stanley, D, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Talent Acquisition Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157614

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 69 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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State
MN

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C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Talent Acquisition Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571587

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Blackwell, Stanley, D, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Talent Acquisition Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534854

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Blackwell, Stanley, D, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

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55432

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Talent Acquisition Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536770

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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City
Minneapolis

State
MN

Zip Code
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FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Talent Acquisition Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857207

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Blackwell, Stanley, D, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Talent Acquisition Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834401

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Blackwell, Stanley, D, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Talent Acquisition Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877695

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Blackwell, Stanley, D, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Talent Acquisition Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878131

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Blackwell, Walter, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534890

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Blackwell, Walter, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536806

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

45.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Blackwell, Walter, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857243

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Blackwell, Walter, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834000

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Blackwell, Walter, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877731

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Blackwell, Walter, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878167

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Blazejewski, Stephen, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President PMR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.20

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888810

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Blazejewski, Stephen, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President PMR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888958

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

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

394.60

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Blazejewski, Stephen, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President PMR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3076.80

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156611

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bolen, Michael, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888491

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bolen, Michael, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889189

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

272.30

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

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bolen, Michael, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156506

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bolen, Michael, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157072

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bolen, Michael, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157695

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

120.00

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

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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A. Bolen, Michael, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157518

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bolen, Michael, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571259

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bolen, Michael, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534564

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

120.00

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

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

FOR LINE NUMBER:
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A. Bolen, Michael, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536676

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bolen, Michael, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856949

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bolen, Michael, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834307

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

120.00

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

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

FOR LINE NUMBER: PAGE 78 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bolen, Michael, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877601

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bolen, Michael, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Govt Affairs Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878037

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bombeck, Charles, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Market Dev Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888833

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

105.00

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bombeck, Charles, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Market Dev Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889258

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bombeck, Charles, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Market Dev Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156634

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bombeck, Charles, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Market Dev Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157195

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bombeck, Charles, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Market Dev Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2017

Transaction ID : A2017-2158082

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bombeck, Charles, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Market Dev Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2017

Transaction ID : A2017-2157638

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bombeck, Charles, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Market Dev Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
10 / 06 / 2017

Transaction ID : A2017-2571611

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bombeck, Charles, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Market Dev Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534878

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bombeck, Charles, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Market Dev Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536794

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bombeck, Charles, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Market Dev Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857231

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
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FOR LINE NUMBER:
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Minneapolis

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Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Market Dev Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2833988

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bombeck, Charles, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Market Dev Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877719

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bombeck, Charles, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Market Dev Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878155

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bonowski, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888394

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bonowski, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889017

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bonowski, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156406

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
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Detailed Summary Page

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A. Bonowski, John, , ,

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City
Minneapolis

State
MN

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55432

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156976

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bonowski, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157983

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bonowski, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157422

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bonowski, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571513

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bonowski, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534756

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bonowski, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536507

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bonowski, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857089

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bonowski, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834036

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bonowski, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877506

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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

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

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Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bonowski, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877943

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bordonaro, Mike, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534573

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bordonaro, Mike, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536685

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

45.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bordonaro, Mike, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857121

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bordonaro, Mike, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834316

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bordonaro, Mike, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877610

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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

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PAGE 89 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bordonaro, Mike, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878046

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bradley, Kevin, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877987

Amount of Each Receipt this Period

8.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brewer, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888418

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

58.00

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

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

FOR LINE NUMBER: PAGE 90 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brewer, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889041

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brewer, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156430

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brewer, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156999

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

120.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 91 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brewer, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2017

Transaction ID : A2017-2158006

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brewer, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Transaction ID : A2017-2157445

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brewer, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

Transaction ID : A2017-2571536

Amount of Each Receipt this Period

40.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

120.00

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 92 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brewer, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534779

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brewer, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536530

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brewer, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857112

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

120.00

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

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

FOR LINE NUMBER: PAGE 93 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brewer, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834059

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brewer, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877529

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brewer, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877966

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

120.00

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 94 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brown, Patrick, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.04

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888749

Amount of Each Receipt this Period

142.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brown, Patrick, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2142.90

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889232

Amount of Each Receipt this Period

142.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brown, Patrick, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2285.76

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156549

Amount of Each Receipt this Period

142.86

☐ Memo Item

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

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

428.58

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 95 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brown, Patrick, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2428.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2017

Transaction ID : A2017-2157114

Amount of Each Receipt this Period

142.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brown, Patrick, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2571.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2017

Transaction ID : A2017-2157737

Amount of Each Receipt this Period

142.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brown, Patrick, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2714.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Transaction ID : A2017-2157559

Amount of Each Receipt this Period

142.86

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

428.58

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 96 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brown, Patrick, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2857.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571300

Amount of Each Receipt this Period

142.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brown, Patrick, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.06

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534605

Amount of Each Receipt this Period

142.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brown, Patrick, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3142.92

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536717

Amount of Each Receipt this Period

142.86

☐ Memo Item

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

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

428.58

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

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

FOR LINE NUMBER: PAGE 97 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brown, Patrick, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3285.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857153

Amount of Each Receipt this Period

142.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brown, Patrick, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3428.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834347

Amount of Each Receipt this Period

142.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brown, Patrick, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3571.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877641

Amount of Each Receipt this Period

142.86

☐ Memo Item

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

428.58

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 98 OF 1014

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brown, Patrick, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3714.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2878077

Amount of Each Receipt this Period

142.86

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brown, William, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2017

Transaction ID : A2017-2536614

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brown, William, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2017

Transaction ID : A2017-2857287

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

162.86

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 99 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brown, William, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834110

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brown, William, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877364

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brown, William, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877776

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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 100 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Buendorf, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534649

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Buendorf, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536835

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Buendorf, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856981

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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

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

FOR LINE NUMBER: PAGE 101 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Buendorf, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834199

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Buendorf, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877398

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Buendorf, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877836

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 102 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Buice, Carl, U, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Bus Analy&Cons Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2017

Transaction ID : A2017-1888582

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Buice, Carl, U, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Bus Analy&Cons Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		28		2017

Transaction ID : A2017-1888986

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Buice, Carl, U, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Bus Analy&Cons Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2017

Transaction ID : A2017-2156712

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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 103 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. Buice, Carl, U, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Bus Analy&Cons Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156826

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Buice, Carl, U, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Bus Analy&Cons Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157833

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Buice, Carl, U, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Bus Analy&Cons Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157272

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 104 OF 1014

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Buice, Carl, U, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Bus Analy&Cons Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571365

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Buice, Carl, U, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Bus Analy&Cons Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534503

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Buice, Carl, U, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Bus Analy&Cons Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536634

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 105 OF 1014
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Buice, Carl, U, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Bus Analy&Cons Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857307

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Buice, Carl, U, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Bus Analy&Cons Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834130

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Buice, Carl, U, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Bus Analy&Cons Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877311

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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 106 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Buice, Carl, U, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Bus Analy&Cons Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877796

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Burnes, John, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534757

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Burnes, John, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536508

Amount of Each Receipt this Period

14.00

☐ Memo Item

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

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

53.00

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

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

FOR LINE NUMBER: PAGE 107 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Burnes, John, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857090

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Burnes, John, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834037

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Burnes, John, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877507

Amount of Each Receipt this Period

14.00

☐ Memo Item

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

42.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 108 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Burnes, John, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877944

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Burrows, Jeffrey, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2017

Transaction ID : A2017-1888708

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Burrows, Jeffrey, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2017

Transaction ID : A2017-1888890

Amount of Each Receipt this Period

15.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

44.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 109 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Burrows, Jeffrey, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Transaction ID : A2017-2156378

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Burrows, Jeffrey, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2017

Transaction ID : A2017-2156948

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Burrows, Jeffrey, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2017

Transaction ID : A2017-2157955

Amount of Each Receipt this Period

15.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

45.00

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 110 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Burrows, Jeffrey, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157394

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Burrows, Jeffrey, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571485

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Burrows, Jeffrey, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534728

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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

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

FOR LINE NUMBER: PAGE 111 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Burrows, Jeffrey, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536914

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Burrows, Jeffrey, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857061

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Burrows, Jeffrey, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834008

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

45.00

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 112 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Burrows, Jeffrey, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877478

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Burrows, Jeffrey, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877915

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Callahan, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

269.22

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888442

Amount of Each Receipt this Period

19.23

☐ Memo Item

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

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

49.23

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)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Callahan, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889065

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Callahan, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.68

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156454

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Callahan, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

326.91

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157022

Amount of Each Receipt this Period

19.23

☐ Memo Item

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

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

57.69

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

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

FOR LINE NUMBER: PAGE 114 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Callahan, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2158029

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Callahan, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157468

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Callahan, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571212

Amount of Each Receipt this Period

19.23

☐ Memo Item

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

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

57.69

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

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

FOR LINE NUMBER: PAGE 115 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Callahan, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.83

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534802

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Callahan, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536552

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Callahan, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

442.29

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856900

Amount of Each Receipt this Period

19.23

☐ Memo Item

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

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

57.69

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 116 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Callahan, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834081

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Callahan, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.75

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877552

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Callahan, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877988

Amount of Each Receipt this Period

19.23

☐ Memo Item

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

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

57.69

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 117 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Carey, Kelly, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534795

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Carey, Kelly, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536546

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Carey, Kelly, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856894

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Carey, Kelly, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834075

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Carey, Kelly, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877546

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Carey, Kelly, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877982

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Carls, Thomas, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D S/B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534880

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Carls, Thomas, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D S/B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536796

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Carls, Thomas, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D S/B

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857233

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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 120 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Carls, Thomas, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D S/B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2833990

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Carls, Thomas, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D S/B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877721

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Carls, Thomas, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D S/B

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878157

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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 121 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Carson, Robert, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Brady

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888775

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Carson, Robert, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Brady

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888922

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Carson, Robert, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Brady

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156575

Amount of Each Receipt this Period

80.00

☐ Memo Item

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

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

240.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 122 OF 1014
(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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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Carson, Robert, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Brady

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M	D D	Y Y Y Y Y Y
08	25	2017

Transaction ID : A2017-2157140

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Carson, Robert, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Brady

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M	D D	Y Y Y Y Y Y
09	08	2017

Transaction ID : A2017-2157762

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Carson, Robert, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Brady

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1520.00

Date of Receipt

M M	D D	Y Y Y Y Y Y
09	22	2017

Transaction ID : A2017-2157584

Amount of Each Receipt this Period

80.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

240.00

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 123 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Carson, Robert, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Brady

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 06 / 2017

Transaction ID : A2017-2571558

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Carson, Robert, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Brady

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 20 / 2017

Transaction ID : A2017-2534629

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Carson, Robert, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Brady

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1760.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 03 / 2017

Transaction ID : A2017-2536741

Amount of Each Receipt this Period

80.00

☐ Memo Item

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

240.00

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 124 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. Carson, Robert, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Brady

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1840.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857177

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Carson, Robert, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Brady

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834371

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Carson, Robert, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Brady

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877665

Amount of Each Receipt this Period

80.00

☐ Memo Item

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

240.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 125 OF 1014

<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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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Carson, Robert, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Brady

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2878101

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Carter, Barney, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2017

Transaction ID : A2017-1888554

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Carter, Barney, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2017

Transaction ID : A2017-1889308

Amount of Each Receipt this Period

30.00

☐ Memo Item**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 126 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Carter, Barney, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156684

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Carter, Barney, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156799

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Carter, Barney, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157806

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

90.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 127 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Carter, Barney, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Transaction ID : A2017-2157245

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Carter, Barney, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

Transaction ID : A2017-2571338

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Carter, Barney, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534476

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

90.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Carter, Barney, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536607

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chastain, Carey, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888581

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Chastain, Carey, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888985

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

60.00

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

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

FOR LINE NUMBER: PAGE 129 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. Chastain, Carey, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156711

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chastain, Carey, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156825

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chastain, Carey, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157832

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 130 OF 1014

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City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Cardiology District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157271

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chastain, Carey, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Cardiology District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571364

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chastain, Carey, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Cardiology District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534502

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

45.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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A. Chastain, Carey, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536633

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chastain, Carey, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857306

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chastain, Carey, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834129

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

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A. Chastain, Carey, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877310

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chastain, Carey, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877795

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chaussee, Jeffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888709

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chaussee, Jeffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888891

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chaussee, Jeffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156379

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chaussee, Jeffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156949

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 134 OF 1014

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A. Chaussee, Jeffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157956

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chaussee, Jeffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157395

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chaussee, Jeffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571486

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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 135 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. Chaussee, Jeffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534729

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chaussee, Jeffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536915

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chaussee, Jeffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857062

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 136 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

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City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834009

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chaussee, Jeffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877479

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chaussee, Jeffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877916

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 137 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chin, Edward, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Reg Aff Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888654

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chin, Edward, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Reg Aff Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889132

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chin, Edward, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Reg Aff Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156323

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 138 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chin, Edward, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Reg Aff Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M	D D	Y Y Y Y
08	25	2017

Transaction ID : A2017-2156895

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chin, Edward, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Reg Aff Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M	D D	Y Y Y Y
09	08	2017

Transaction ID : A2017-2157902

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chin, Edward, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Reg Aff Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M	D D	Y Y Y Y
09	22	2017

Transaction ID : A2017-2157341

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

150.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chin, Edward, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Reg Aff Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571433

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chin, Edward, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Reg Aff Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534676

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chin, Edward, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Reg Aff Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536862

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chin, Edward, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Reg Aff Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857008

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chin, Edward, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Reg Aff Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834226

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chin, Edward, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Reg Aff Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877425

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 141 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. Chin, Edward, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Reg Aff Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877863

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chirico, Anthony, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888839

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chirico, Anthony, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889264

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

110.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chirico, Anthony, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156640

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chirico, Anthony, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157201

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chirico, Anthony, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

540.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2158088

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

90.00

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 143 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chirico, Anthony, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157644

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chirico, Anthony, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571617

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chirico, Anthony, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534884

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

90.00

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

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

FOR LINE NUMBER: PAGE 144 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chirico, Anthony, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536800

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chirico, Anthony, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857237

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chirico, Anthony, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2833994

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

90.00

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 145 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chirico, Anthony, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877725

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chirico, Anthony, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878161

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Christenson, Steven, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156613

Amount of Each Receipt this Period

13.00

☐ Memo Item

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

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

73.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Christenson, Steven, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157176

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Christenson, Steven, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2158064

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Christenson, Steven, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157620

Amount of Each Receipt this Period

13.00

☐ Memo Item

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

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

39.00

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)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Christenson, Steven, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571593

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Christenson, Steven, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534860

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Christenson, Steven, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536776

Amount of Each Receipt this Period

13.00

☐ Memo Item

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

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

39.00

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

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Christenson, Steven, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857213

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Christenson, Steven, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834407

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Christenson, Steven, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877701

Amount of Each Receipt this Period

13.00

☐ Memo Item

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

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39.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Christenson, Steven, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878137

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Christopher, Mary, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534554

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Christopher, Mary, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536667

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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33.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Christopher, Mary, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856939

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Christopher, Mary, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834297

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Christopher, Mary, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877591

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Christopher, Mary, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878027

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark, Doron, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889125

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clark, Doron, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156316

Amount of Each Receipt this Period

14.00

☐ Memo Item

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

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

38.00

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clark, Doron, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156888

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark, Doron, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157895

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clark, Doron, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

266.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157334

Amount of Each Receipt this Period

14.00

☐ Memo Item

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

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

42.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clark, Doron, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571426

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark, Doron, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534669

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Clark, Doron, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536855

Amount of Each Receipt this Period

14.00

☐ Memo Item

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

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

42.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 154 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clark, Doron, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857001

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark, Doron, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834219

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clark, Doron, P, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877418

Amount of Each Receipt this Period

14.00

☐ Memo Item

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

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

42.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clark, Doron, P.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877856

Amount of Each Receipt this Period

14.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark, Jeffrey, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888710

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clark, Jeffrey, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888892

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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164.00

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clark, Jeffrey, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156380

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark, Jeffrey, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156950

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clark, Jeffrey, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157957

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

225.00

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

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

FOR LINE NUMBER: PAGE 157 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clark, Jeffrey, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1425.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157396

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark, Jeffrey, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571487

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clark, Jeffrey, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1575.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534730

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

225.00

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

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

FOR LINE NUMBER: PAGE 158 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clark, Jeffrey, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536916

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark, Jeffrey, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1725.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857063

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Clark, Jeffrey, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834010

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

225.00

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

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

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FOR LINE NUMBER:
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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MN

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55432

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877480

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark, Jeffrey, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877917

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clark, Robert, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888776

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 160 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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A. Clark, Robert, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
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State
MN

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888923

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark, Robert, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156576

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clark, Robert, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157141

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 161 OF 1014

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A. Clark, Robert, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157763

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark, Robert, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157585

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clark, Robert, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571559

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 162 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clark, Robert, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534630

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark, Robert, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536742

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clark, Robert, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857178

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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 163 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. Clark, Robert, E, Mr.,

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City
Minneapolis

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2435.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834372

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark, Robert, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2570.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877666

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clark, Robert, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2705.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878102

Amount of Each Receipt this Period

135.00

☐ Memo Item

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

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

405.00

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

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

FOR LINE NUMBER: PAGE 164 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clyde, Alexandra, T, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Gbl HlthPolReimbHCEcon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.94

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888525

Amount of Each Receipt this Period

35.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clyde, Alexandra, T, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Gbl HlthPolReimbHCEcon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.65

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889279

Amount of Each Receipt this Period

35.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clyde, Alexandra, T, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Gbl HlthPolReimbHCEcon

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

571.36

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156655

Amount of Each Receipt this Period

35.71

☐ Memo Item

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

107.13

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 165 OF 1014

(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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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clyde, Alexandra, T, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl HlthPolReimbHCEcon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2017

Transaction ID : A2017-2156770

Amount of Each Receipt this Period

35.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clyde, Alexandra, T, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl HlthPolReimbHCEcon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

642.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2017

Transaction ID : A2017-2157777

Amount of Each Receipt this Period

35.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clyde, Alexandra, T, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl HlthPolReimbHCEcon

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

678.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2017

Transaction ID : A2017-2157216

Amount of Each Receipt this Period

35.71

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

107.13

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

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

FOR LINE NUMBER: PAGE 166 OF 1014
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clyde, Alexandra, T, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl HlthPolReimbHCEcon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

714.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571309

Amount of Each Receipt this Period

35.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clyde, Alexandra, T, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl HlthPolReimbHCEcon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.91

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534511

Amount of Each Receipt this Period

35.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clyde, Alexandra, T, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl HlthPolReimbHCEcon

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

785.62

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536578

Amount of Each Receipt this Period

35.71

☐ Memo Item

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

107.13

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 167 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clyde, Alexandra, T, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Gbl HlthPolReimbHCEcon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

821.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857252

Amount of Each Receipt this Period

35.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clyde, Alexandra, T, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Gbl HlthPolReimbHCEcon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

857.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834138

Amount of Each Receipt this Period

35.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Clyde, Alexandra, T, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Gbl HlthPolReimbHCEcon

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

892.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877337

Amount of Each Receipt this Period

35.71

☐ Memo Item

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

107.13

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

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

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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clyde, Alexandra, T, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl HlthPolReimbHCEcon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

928.46

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877741

Amount of Each Receipt this Period

35.71

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clyne, Jason, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin CVG Solutions Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534723

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clyne, Jason, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin CVG Solutions Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536909

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

55.71

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

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

FOR LINE NUMBER: PAGE 169 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clyne, Jason, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin CVG Solutions Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857056

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clyne, Jason, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin CVG Solutions Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834003

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clyne, Jason, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin CVG Solutions Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877473

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. Clyne, Jason, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
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State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin CVG Solutions Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877910

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cohen, Matthew, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D SI North Haven

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888485

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cohen, Matthew, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D SI North Haven

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889183

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 171 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cohen, Matthew, D, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP R/D SI North Haven

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	11	/	2017

Transaction ID : A2017-2156500

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cohen, Matthew, D, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP R/D SI North Haven

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2017

Transaction ID : A2017-2157066

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cohen, Matthew, D, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP R/D SI North Haven

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2017

Transaction ID : A2017-2157689

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

60.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 172 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cohen, Matthew, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D SI North Haven

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157512

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cohen, Matthew, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D SI North Haven

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571253

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cohen, Matthew, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D SI North Haven

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534558

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

60.00

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

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

FOR LINE NUMBER: PAGE 173 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. Cohen, Matthew, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D SI North Haven

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536670

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cohen, Matthew, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D SI North Haven

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856943

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cohen, Matthew, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D SI North Haven

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834301

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

60.00

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

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

FOR LINE NUMBER: PAGE 174 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cohen, Matthew, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D SI North Haven

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877595

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cohen, Matthew, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D SI North Haven

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878031

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Copel, Marguerite, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Comms MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888471

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 175 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Copel, Marguerite, F, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Comms MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : A2017-1889167

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Copel, Marguerite, F, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Comms MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Transaction ID : A2017-2156484

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Copel, Marguerite, F, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Comms MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2017

Transaction ID : A2017-2157050

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

150.00

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

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

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

FOR LINE NUMBER: PAGE 176 OF 1014
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Copel, Marguerite, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Comms MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157673

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Copel, Marguerite, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Comms MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157496

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Copel, Marguerite, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Comms MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571239

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 177 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Copel, Marguerite, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Comms MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534830

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Copel, Marguerite, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Comms MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536656

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Copel, Marguerite, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Comms MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856927

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 178 OF 1014

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Copel, Marguerite, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Comms MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834285

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Copel, Marguerite, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Comms MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877579

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Copel, Marguerite, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Comms MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878015

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Corgan-Porth, Elizabeth, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Benefits Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888557

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Corgan-Porth, Elizabeth, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Benefits Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888961

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Corgan-Porth, Elizabeth, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Benefits Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156687

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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 180 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Corgan-Porth, Elizabeth, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Benefits Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156802

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Corgan-Porth, Elizabeth, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Benefits Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157809

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Corgan-Porth, Elizabeth, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Benefits Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157248

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Corgan-Porth, Elizabeth, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Prin Benefits Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571341

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Corgan-Porth, Elizabeth, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Prin Benefits Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534479

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Corgan-Porth, Elizabeth, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Prin Benefits Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536610

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Corgan-Porth, Elizabeth, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Benefits Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857283

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Corgan-Porth, Elizabeth, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Benefits Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834106

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Corgan-Porth, Elizabeth, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Benefits Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877360

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

45.00

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

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

FOR LINE NUMBER: PAGE 183 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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A. Corgan-Porth, Elizabeth, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Benefits Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877772

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cosano, Alberto, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534510

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cosano, Alberto, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536577

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

35.00

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 184 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cosano, Alberto, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857251

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cosano, Alberto, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834137

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cosano, Alberto, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877336

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cosano, Alberto, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877740

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Courtney, William, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP MDT Bus Servs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888558

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Courtney, William, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP MDT Bus Servs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2025.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888962

Amount of Each Receipt this Period

135.00

☐ Memo Item

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

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

280.00

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Courtney, William, B, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP MDT Bus Servs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2160.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156688

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Courtney, William, B, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP MDT Bus Servs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2295.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156803

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Courtney, William, B, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP MDT Bus Servs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2430.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157810

Amount of Each Receipt this Period

135.00

☐ Memo Item

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

405.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Courtney, William, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP MDT Bus Servs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2565.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157249

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Courtney, William, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP MDT Bus Servs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571342

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Courtney, William, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP MDT Bus Servs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2835.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534480

Amount of Each Receipt this Period

135.00

☐ Memo Item

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

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405.00

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Courtney, William, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP MDT Bus Servs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2970.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536611

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Courtney, William, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP MDT Bus Servs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3105.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857284

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Courtney, William, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP MDT Bus Servs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834107

Amount of Each Receipt this Period

135.00

☐ Memo Item

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

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

405.00

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Courtney, William, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP MDT Bus Servs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3375.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877361

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Courtney, William, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP MDT Bus Servs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3510.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877773

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Coyle, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2688.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888502

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

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

462.00

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Coyle, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2880.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889200

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Coyle, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156517

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Coyle, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3264.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157082

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

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

576.00

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Coyle, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3456.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157705

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Coyle, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3648.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157528

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Coyle, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3840.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571269

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

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

576.00

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

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

FOR LINE NUMBER: PAGE 192 OF 1014

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Coyle, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4032.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534574

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Coyle, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4224.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536686

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Coyle, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4416.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857122

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

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

576.00

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 193 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Coyle, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4608.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834317

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Coyle, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877611

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Coyle, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878047

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

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

576.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Crook, Leslie, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888463

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Crook, Leslie, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889159

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Crook, Leslie, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156476

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 195 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Crook, Leslie, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

MM / DD / YYYY
08 / 25 / 2017

Transaction ID : A2017-2157042

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Crook, Leslie, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2017

Transaction ID : A2017-2157665

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Crook, Leslie, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2017

Transaction ID : A2017-2157488

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 196 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Crook, Leslie, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571231

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Crook, Leslie, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534822

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Crook, Leslie, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536571

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 197 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Crook, Leslie, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2856919

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Crook, Leslie, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834277

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Crook, Leslie, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877571

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 198 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Crook, Leslie, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2878007

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Crouch, Jeffery, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin Field Clinical Eng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

Transaction ID : A2017-2534731

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Crouch, Jeffery, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin Field Clinical Eng

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2017

Transaction ID : A2017-2536917

Amount of Each Receipt this Period

10.00

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

45.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Crouch, Jeffery, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Field Clinical Eng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857064

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Crouch, Jeffery, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Field Clinical Eng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834011

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Crouch, Jeffery, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Field Clinical Eng

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877481

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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 200 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Crouch, Jeffery, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Field Clinical Eng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877918

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dagoberg, Pamela Mari, O, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534600

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dagoberg, Pamela Mari, O, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536712

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 201 OF 1014

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dagoberg, Pamela Mari, O, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2017

Transaction ID : A2017-2857148

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dagoberg, Pamela Mari, O, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834342

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dagoberg, Pamela Mari, O, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877636

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

30.00

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 202 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dagoberg, Pamela Mari, O, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878072

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Darkins, Adam, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Strat Partnerships AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888518

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Daw, Sarah, C, ,

Mailing Address 7000 Central Ave NE

City
Minneapolis

State
MN

Zip Code
55432-3568

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Technical Svc Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534837

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

100.00

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

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

FOR LINE NUMBER: PAGE 203 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Daw, Sarah, C, ,

Mailing Address 7000 Central Ave NE

City
Minneapolis

State
MN

Zip Code
55432-3568

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Technical Svc Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536753

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Daw, Sarah, C, ,

Mailing Address 7000 Central Ave NE

City
Minneapolis

State
MN

Zip Code
55432-3568

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Technical Svc Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857190

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Daw, Sarah, C, ,

Mailing Address 7000 Central Ave NE

City
Minneapolis

State
MN

Zip Code
55432-3568

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Technical Svc Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834384

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Daw, Sarah, C, ,

Mailing Address 7000 Central Ave NE

City
Minneapolis

State
MN

Zip Code
55432-3568

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Technical Svc Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877678

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Daw, Sarah, C, ,

Mailing Address 7000 Central Ave NE

City
Minneapolis

State
MN

Zip Code
55432-3568

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Technical Svc Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878114

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Delgado, Whitney, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Clinical Specialist CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888846

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

45.00

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

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

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Delgado, Whitney, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Prin Clinical Specialist CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889271

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Delgado, Whitney, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)

Prin Clinical Specialist CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156647

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Delgado, Whitney, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)

Prin Clinical Specialist CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157208

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
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Detailed Summary Page

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A. Delgado, Whitney, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Clinical Specialist CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2017

Transaction ID : A2017-2158095

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Delgado, Whitney, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Clinical Specialist CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2017

Transaction ID : A2017-2157651

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Delgado, Whitney, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Clinical Specialist CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
10 / 06 / 2017

Transaction ID : A2017-2571624

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
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Detailed Summary Page

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Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Clinical Specialist CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534891

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Delgado, Whitney, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Clinical Specialist CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536807

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Delgado, Whitney, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Clinical Specialist CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857244

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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Detailed Summary Page

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A. Delgado, Whitney, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Clinical Specialist CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834001

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Delgado, Whitney, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Clinical Specialist CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877732

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Delgado, Whitney, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Clinical Specialist CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878168

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dennis, Charles, L, Mr., II

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Open Innov - IP CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888589

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dennis, Charles, L, Mr., II

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Open Innov - IP CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2025.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888993

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dennis, Charles, L, Mr., II

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Open Innov - IP CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2160.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156303

Amount of Each Receipt this Period

135.00

☐ Memo Item

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

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

405.00

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Deskus, Janice, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888702

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Deskus, Janice, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888884

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Deskus, Janice, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156372

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 211 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Deskus, Janice, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156942

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Deskus, Janice, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157949

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Deskus, Janice, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157388

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 212 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571479

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Deskus, Janice, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534722

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Deskus, Janice, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536908

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Deskus, Janice, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857055

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Deskus, Janice, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834273

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Deskus, Janice, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877472

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Deskus, Janice, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877909

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dietzler, Kristin, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP SMO Commercial Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.44

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888452

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dietzler, Kristin, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP SMO Commercial Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

576.90

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889148

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

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

126.92

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

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

FOR LINE NUMBER: PAGE 215 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dietzler, Kristin, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP SMO Commercial Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.36

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156465

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dietzler, Kristin, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP SMO Commercial Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.82

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157032

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dietzler, Kristin, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP SMO Commercial Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

692.28

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157655

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

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

115.38

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

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

FOR LINE NUMBER:
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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dietzler, Kristin, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP SMO Commercial Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.74

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157478

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dietzler, Kristin, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP SMO Commercial Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571221

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dietzler, Kristin, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP SMO Commercial Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

807.66

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534812

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

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

115.38

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

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

FOR LINE NUMBER:
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PAGE 217 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dietzler, Kristin, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP SMO Commercial Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536561

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dietzler, Kristin, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP SMO Commercial Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

884.58

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856909

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dietzler, Kristin, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP SMO Commercial Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

923.04

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834090

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

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

115.38

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

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

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dietzler, Kristin, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP SMO Commercial Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877561

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dietzler, Kristin, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP SMO Commercial Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877997

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dodd, Sheri, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888803

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

101.92

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

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dodd, Sheri, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP/GM Patient Mon Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888951

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dodd, Sheri, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156604

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dodd, Sheri, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157168

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 220 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dodd, Sheri, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2017

Transaction ID : A2017-2158056

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dodd, Sheri, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2017

Transaction ID : A2017-2157612

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dodd, Sheri, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
10 / 06 / 2017

Transaction ID : A2017-2571585

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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 221 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dodd, Sheri, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534852

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dodd, Sheri, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536768

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dodd, Sheri, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857205

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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 222 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dodd, Sheri, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834399

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dodd, Sheri, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877693

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dodd, Sheri, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878129

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Drager, Craig, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D-ProjMgmt ST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1260.00

Date of Receipt

07 / 14 / 2017

Transaction ID : A2017-1888613

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Drager, Craig, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D-ProjMgmt ST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

07 / 28 / 2017

Transaction ID : A2017-1889090

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Drager, Craig, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D-ProjMgmt ST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156741

Amount of Each Receipt this Period

90.00

☐ Memo Item

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

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

270.00

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

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Minneapolis

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MN

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55432

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D-ProjMgmt ST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156855

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Drager, Craig, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D-ProjMgmt ST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1620.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157862

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Drager, Craig, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D-ProjMgmt ST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1710.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157301

Amount of Each Receipt this Period

90.00

☐ Memo Item

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

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

270.00

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

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A. Drager, Craig, L, Mr.,

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City
Minneapolis

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MN

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D-ProjMgmt ST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571394

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Drager, Craig, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D-ProjMgmt ST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534544

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Drager, Craig, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D-ProjMgmt ST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1980.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536823

Amount of Each Receipt this Period

90.00

☐ Memo Item

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

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

270.00

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

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Detailed Summary Page

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A. Drager, Craig, L, Mr.,

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City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D-ProjMgmt ST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2070.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856968

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Echeverria, Raul, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Logistics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888763

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Echeverria, Raul, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Logistics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888910

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

140.00

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

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A. Echeverria, Raul, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Logistics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156563

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Echeverria, Raul, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Logistics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157128

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Echeverria, Raul, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Logistics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157751

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

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A. Echeverria, Raul, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Logistics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157573

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Echeverria, Raul, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Logistics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 06 / 2017

Transaction ID : A2017-2571547

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Echeverria, Raul, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Logistics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

10 / 20 / 2017

Transaction ID : A2017-2534618

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
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A. Echeverria, Raul, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Logistics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536730

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Echeverria, Raul, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Logistics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857166

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Echeverria, Raul, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Logistics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834360

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 230 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. Echeverria, Raul, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Logistics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877654

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Echeverria, Raul, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Logistics Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878090

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Elamin, Fadwa, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888669

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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Detailed Summary Page

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Elamin, Fadwa, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888850

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Elamin, Fadwa, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156338

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Elamin, Fadwa, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156909

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Elamin, Fadwa, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157916

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Elamin, Fadwa, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157355

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Elamin, Fadwa, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571447

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 233 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Elamin, Fadwa, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534690

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Elamin, Fadwa, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536876

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Elamin, Fadwa, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

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MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857022

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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 234 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834240

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Elamin, Fadwa, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877439

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Elamin, Fadwa, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

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MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877876

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 235 OF 1014
(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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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Elder, Scot, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Chief Couns RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2017

Transaction ID : A2017-1888790

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Elder, Scot, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Chief Couns RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : A2017-1888938

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Elder, Scot, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Chief Couns RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Transaction ID : A2017-2156591

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

75.00

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 236 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. Elder, Scot, M, Mr.,

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157155

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Elder, Scot, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
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55432

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2158043

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Elder, Scot, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157599

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 237 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Zip Code
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FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571572

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Elder, Scot, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534839

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Elder, Scot, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536755

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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 238 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857192

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Elder, Scot, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834386

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Elder, Scot, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
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MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877680

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 239 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP/Chief Couns RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878116

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Emms, Thomas, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888566

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Emms, Thomas, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888970

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 240 OF 1014
(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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A. Emms, Thomas, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	11	/	2017

Transaction ID : A2017-2156696

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Emms, Thomas, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	25	/	2017

Transaction ID : A2017-2156811

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Emms, Thomas, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	08	/	2017

Transaction ID : A2017-2157818

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 241 OF 1014

<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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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Emms, Thomas, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Transaction ID : A2017-2157257

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Emms, Thomas, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

Transaction ID : A2017-2571350

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Emms, Thomas, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534488

Amount of Each Receipt this Period

25.00

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

75.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Emms, Thomas, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 03 / 2017

Transaction ID : A2017-2536619

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Emms, Thomas, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857292

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Emms, Thomas, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834115

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Emms, Thomas, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877314

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Emms, Thomas, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877781

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Englehardt, Gregory, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888686

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
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Medtronic Inc. PAC

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A. Englehardt, Gregory, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888867

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Englehardt, Gregory, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156355

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Englehardt, Gregory, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156925

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Englehardt, Gregory, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157932

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Englehardt, Gregory, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157371

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Englehardt, Gregory, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571463

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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

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

Use separate schedule(s)
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A. Englehardt, Gregory, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534706

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Englehardt, Gregory, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536892

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Englehardt, Gregory, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857038

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

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A. Englehardt, Gregory, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834256

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Englehardt, Gregory, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877455

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Englehardt, Gregory, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877892

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Esparza-Coss, Emilio, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888662

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Esparza-Coss, Emilio, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889140

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Esparza-Coss, Emilio, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156331

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 249 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Esparza-Coss, Emilio, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156902

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Esparza-Coss, Emilio, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157909

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Esparza-Coss, Emilio, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157348

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

75.00

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

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 250 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Esparza-Coss, Emilio, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
10 / 06 / 2017

Transaction ID : A2017-2571440

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Esparza-Coss, Emilio, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

MM / DD / YYYY
10 / 20 / 2017

Transaction ID : A2017-2534683

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Esparza-Coss, Emilio, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

MM / DD / YYYY
11 / 03 / 2017

Transaction ID : A2017-2536869

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Esparza-Coss, Emilio, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857015

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Esparza-Coss, Emilio, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834233

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Esparza-Coss, Emilio, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877432

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 252 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Esparza-Coss, Emilio, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877869

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Evans, Christopher, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888436

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Evans, Christopher, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889059

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

65.00

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

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

FOR LINE NUMBER: PAGE 253 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Evans, Christopher, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156448

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Evans, Christopher, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157016

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Evans, Christopher, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2158023

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Evans, Christopher, K, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2017

Transaction ID : A2017-2157462

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Evans, Christopher, K, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2017

Transaction ID : A2017-2571206

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Evans, Christopher, K, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

Transaction ID : A2017-2534796

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

60.00

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

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

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Evans, Christopher, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536547

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Evans, Christopher, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856895

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Evans, Christopher, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834076

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

60.00

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Evans, Christopher, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877547

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Evans, Christopher, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877983

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Evans, Renee, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534622

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

50.00

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

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

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Evans, Renee, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536734

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Evans, Renee, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857170

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Evans, Renee, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834364

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Evans, Renee, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877658

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Evans, Renee, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878094

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Faber, Karen, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative IV - MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534786

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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 259 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Faber, Karen, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sales Representative IV - MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 03 / 2017

Transaction ID : A2017-2536537

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Faber, Karen, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sales Representative IV - MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2856885

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Faber, Karen, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sales Representative IV - MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834066

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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 260 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Faber, Karen, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative IV - MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877537

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Faber, Karen, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative IV - MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877973

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fairchild, Kenneth, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888439

Amount of Each Receipt this Period

135.00

☐ Memo Item

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

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

155.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fairchild, Kenneth, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2025.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889062

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fairchild, Kenneth, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2160.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156451

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fairchild, Kenneth, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2295.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157019

Amount of Each Receipt this Period

135.00

☐ Memo Item

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

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

405.00

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

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fairchild, Kenneth, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2158026

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fairchild, Kenneth, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2565.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157465

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fairchild, Kenneth, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571209

Amount of Each Receipt this Period

135.00

☐ Memo Item

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

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

405.00

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

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Detailed Summary Page

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fairchild, Kenneth, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2835.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534799

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fairchild, Kenneth, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2970.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536549

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fairchild, Kenneth, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3105.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856897

Amount of Each Receipt this Period

135.00

☐ Memo Item

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

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

405.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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Mailing Address 710 Medtronic Parkway NE

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MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834078

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fairchild, Kenneth, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877549

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fairchild, Kenneth, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3540.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877985

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

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

435.00

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

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Farkas, Jeffrey, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP US Fed Reimb

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1078.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888712

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Farkas, Jeffrey, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP US Fed Reimb

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1155.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888894

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Farkas, Jeffrey, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP US Fed Reimb

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1232.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156382

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

231.00

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

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

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Farkas, Jeffrey, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP US Fed Reimb

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1309.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156952

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Farkas, Jeffrey, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP US Fed Reimb

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1386.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157959

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Farkas, Jeffrey, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP US Fed Reimb

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1463.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157398

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

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

231.00

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

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Detailed Summary Page

FOR LINE NUMBER:
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A. Farkas, Jeffrey, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP US Fed Reimb

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571489

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Farkas, Jeffrey, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP US Fed Reimb

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1617.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534732

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Farkas, Jeffrey, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP US Fed Reimb

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1694.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536918

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

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

231.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 268 OF 1014

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Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP US Fed Reimb

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1771.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857065

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Farkas, Jeffrey, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP US Fed Reimb

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1848.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834012

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Farkas, Jeffrey, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP US Fed Reimb

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877482

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

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

231.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 269 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Farkas, Jeffrey, A, Mr.,

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City
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State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP US Fed Reimb

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2002.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877919

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Feipel, Jason, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534724

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Feipel, Jason, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536910

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

97.00

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

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

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Feipel, Jason, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857057

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Feipel, Jason, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834004

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Feipel, Jason, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877474

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 271 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Feipel, Jason, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877911

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fellows, Kay, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2017

Transaction ID : A2017-1888430

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fellows, Kay, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2017

Transaction ID : A2017-1889053

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

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

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

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

FOR LINE NUMBER: PAGE 272 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fellows, Kay, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156442

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fellows, Kay, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157010

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fellows, Kay, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2158017

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 273 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fellows, Kay, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157456

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fellows, Kay, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571200

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fellows, Kay, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534790

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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 274 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fellows, Kay, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 03 / 2017

Transaction ID : A2017-2536541

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fellows, Kay, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2856889

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fellows, Kay, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834070

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 275 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fellows, Kay, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877541

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fellows, Kay, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877977

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Felton, Brian, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888573

Amount of Each Receipt this Period

120.00

☐ Memo Item

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

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

170.00

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

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

FOR LINE NUMBER: PAGE 276 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Felton, Brian, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888977

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Felton, Brian, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156703

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Felton, Brian, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2040.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156818

Amount of Each Receipt this Period

120.00

☐ Memo Item

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

360.00

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

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

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

FOR LINE NUMBER: PAGE 277 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Felton, Brian, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2160.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157825

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Felton, Brian, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157264

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Felton, Brian, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571357

Amount of Each Receipt this Period

120.00

☐ Memo Item

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

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

360.00

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

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

FOR LINE NUMBER: PAGE 278 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Felton, Brian, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2520.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534495

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Felton, Brian, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2640.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536626

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Felton, Brian, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2760.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857299

Amount of Each Receipt this Period

120.00

☐ Memo Item

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

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

360.00

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

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

FOR LINE NUMBER: PAGE 279 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Felton, Brian, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Chief Couns DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2880.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834122

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Felton, Brian, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Chief Couns DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877321

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Felton, Brian, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Chief Couns DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3120.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877788

Amount of Each Receipt this Period

120.00

☐ Memo Item

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

360.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 280 OF 1014

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

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fenner, Andreas, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534459

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fenner, Andreas, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : A2017-2536590

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fenner, Andreas, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2017

Transaction ID : A2017-2857264

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

30.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 281 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fenner, Andreas, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834150

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fenner, Andreas, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877349

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fenner, Andreas, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877753

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 282 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Finseth, Myron, L, Mr.,

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Prin Technical Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534584

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Finseth, Myron, L, Mr.,

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Prin Technical Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536696

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Finseth, Myron, L, Mr.,

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Prin Technical Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857132

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Finseth, Myron, L, Mr.,

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Prin Technical Writer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834327

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Finseth, Myron, L, Mr.,

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Prin Technical Writer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877621

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Finseth, Myron, L, Mr.,

Mailing Address 8200 Coral Sea St NE

City

Mounds View

State

MN

Zip Code

55112-4391

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Prin Technical Writer

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 29 / 2017

Transaction ID : A2017-2878057

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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 284 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fitzgerald, Christine, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

07 / 14 / 2017

Transaction ID : A2017-1888601

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fitzgerald, Christine, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 28 / 2017

Transaction ID : A2017-1889078

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fitzgerald, Christine, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156730

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

60.00

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

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

FOR LINE NUMBER: PAGE 285 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fitzgerald, Christine, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156844

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fitzgerald, Christine, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157851

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fitzgerald, Christine, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157290

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 286 OF 1014

(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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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fitzgerald, Christine, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

Transaction ID : A2017-2571383

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fitzgerald, Christine, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534533

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fitzgerald, Christine, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : A2017-2536812

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 287 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fitzgerald, Christine, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856957

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fitzgerald, Christine, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834176

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fitzgerald, Christine, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877376

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 288 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fitzgerald, Christine, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877814

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Flanagan, William, O, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534481

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Flanagan, William, O, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536612

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 289 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Flanagan, William, O, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857285

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Flanagan, William, O, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834108

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Flanagan, William, O, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877362

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Flanagan, William, O, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877774

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Flores, Orlando, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888741

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Flores, Orlando, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889224

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 291 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Flores, Orlando, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156541

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Flores, Orlando, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157106

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Flores, Orlando, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157729

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Flores, Orlando, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157551

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Flores, Orlando, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571292

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Flores, Orlando, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534597

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 293 OF 1014

(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Flores, Orlando, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 03 / 2017

Transaction ID : A2017-2536709

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Flores, Orlando, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857145

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Flores, Orlando, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834339

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 294 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Flores, Orlando, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Compliance Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877633

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Flores, Orlando, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Compliance Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878069

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Foust, John, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Pain Integrated Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888396

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

90.00

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 295 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Foust, John, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Integrated Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889019

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Foust, John, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Integrated Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156408

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Foust, John, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Integrated Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156978

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 296 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Foust, John, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Integrated Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157985

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Foust, John, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Integrated Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157424

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Foust, John, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Integrated Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571515

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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 297 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Foust, John, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Integrated Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534758

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Foust, John, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Integrated Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536509

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Foust, John, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Integrated Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857091

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Foust, John, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Pain Integrated Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834038

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Foust, John, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Pain Integrated Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877508

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Foust, John, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Pain Integrated Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877945

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fowler, Colleen, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

07 / 14 / 2017

Transaction ID : A2017-1888611

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fowler, Colleen, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

07 / 28 / 2017

Transaction ID : A2017-1889088

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fowler, Colleen, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156739

Amount of Each Receipt this Period

125.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

375.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 300 OF 1014
(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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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fowler, Colleen, M, Ms.,

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City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2017

Transaction ID : A2017-2156853

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fowler, Colleen, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2017

Transaction ID : A2017-2157860

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fowler, Colleen, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Transaction ID : A2017-2157299

Amount of Each Receipt this Period

125.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

375.00

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 301 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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MN

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571392

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fowler, Colleen, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

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MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2625.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534542

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fowler, Colleen, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536821

Amount of Each Receipt this Period

125.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

375.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 302 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2875.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856966

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fowler, Colleen, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834185

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fowler, Colleen, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3125.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877385

Amount of Each Receipt this Period

125.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

375.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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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City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877823

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Franson, Paul, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

Transaction ID : A2017-2534610

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Franson, Paul, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2017

Transaction ID : A2017-2536722

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

145.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Franson, Paul, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857158

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Franson, Paul, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834352

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Franson, Paul, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877646

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 305 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Zip Code
55432

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Program/Proj Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878082

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Frenkel, Ellen, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Mktg AMER RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888660

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Frenkel, Ellen, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Mktg AMER RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889138

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 306 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Mktg AMER RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156329

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Frenkel, Ellen, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
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State
MN

Zip Code
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FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Mktg AMER RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156900

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Frenkel, Ellen, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Mktg AMER RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157907

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 307 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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C

Name of Employer (for Individual)
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Occupation (for Individual)
VP Mktg AMER RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157346

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Frenkel, Ellen, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
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FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Mktg AMER RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571438

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Frenkel, Ellen, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Mktg AMER RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534681

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Mktg AMER RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536867

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Frenkel, Ellen, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Mktg AMER RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857013

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Frenkel, Ellen, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Mktg AMER RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834231

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Frenkel, Ellen, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Mktg AMER RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877430

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Frenkel, Ellen, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Mktg AMER RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877734

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fuher, Patricia, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Prod Dev - AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156547

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fuher, Patricia, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Prod Dev - AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2017

Transaction ID : A2017-2157112

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fuher, Patricia, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Prod Dev - AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2017

Transaction ID : A2017-2157735

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fuher, Patricia, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Prod Dev - AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2017

Transaction ID : A2017-2157557

Amount of Each Receipt this Period

13.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

39.00

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 311 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fuher, Patricia, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Prod Dev - AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571298

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fuher, Patricia, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Prod Dev - AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534603

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fuher, Patricia, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Prod Dev - AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536715

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 312 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fuher, Patricia, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Prod Dev - AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857151

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fuher, Patricia, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Prod Dev - AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834345

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fuher, Patricia, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Prod Dev - AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877639

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

39.00

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 313 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fuher, Patricia, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Prod Dev - AF Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878075

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gabler, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536615

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gabler, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857288

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

39.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 314 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gabler, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2017

Transaction ID : A2017-2834111

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gabler, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2017

Transaction ID : A2017-2877365

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gabler, Robert, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2017

Transaction ID : A2017-2877777

Amount of Each Receipt this Period

13.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

39.00

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 315 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gallagher, Kellie, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534794

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gallagher, Kellie, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536545

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gallagher, Kellie, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856893

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 316 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gallagher, Kellie, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834074

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gallagher, Kellie, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877545

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gallagher, Kellie, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877981

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

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 317 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gamboni, Kristin, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep II - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534813

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gamboni, Kristin, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep II - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536562

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gamboni, Kristin, , ,

Mailing Address 15 Hampshire St.

City
Mansfield

State
MA

Zip Code
02048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep II - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856910

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gamboni, Kristin, , ,

Mailing Address 15 Hampshire St.

City
MansfieldState
MAZip Code
02048FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sales Rep II - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834091

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gamboni, Kristin, , ,

Mailing Address 15 Hampshire St.

City
MansfieldState
MAZip Code
02048FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sales Rep II - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877562

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gamboni, Kristin, , ,

Mailing Address 15 Hampshire St.

City
MansfieldState
MAZip Code
02048FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sales Rep II - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877998

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

30.00

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 319 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gamgort, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888628

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gamgort, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889106

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gamgort, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156756

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 320 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gamgort, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156869

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gamgort, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157876

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gamgort, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1520.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157315

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gamgort, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 06 / 2017

Transaction ID : A2017-2571407

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gamgort, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 20 / 2017

Transaction ID : A2017-2534650

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Gamgort, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1760.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 03 / 2017

Transaction ID : A2017-2536836

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

240.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gamgort, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1840.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856982

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gamgort, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834200

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gamgort, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877399

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gamgort, David, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales Area CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877837

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gardiner, Whitney, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Government Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888847

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gardiner, Whitney, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Government Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889272

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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PAGE 324 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gardiner, Whitney, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Government Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156648

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gardiner, Whitney, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Government Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157209

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gardiner, Whitney, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Government Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2158096

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 325 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gardiner, Whitney, H, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Government Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157652

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gardiner, Whitney, H, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Government Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571625

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gardiner, Whitney, H, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Government Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534892

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

120.00

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 326 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gardiner, Whitney, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Government Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536808

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gardiner, Whitney, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Government Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857245

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gardiner, Whitney, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Government Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834002

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 327 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gardiner, Whitney, H, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Government Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877733

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gardiner, Whitney, H, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Government Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878169

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Garey, Roland, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888821

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

130.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Garey, Roland, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889246

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Garey, Roland, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156622

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Garey, Roland, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157185

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Garey, Roland, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2158072

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Garey, Roland, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157628

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Garey, Roland, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571601

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 330 OF 1014

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A. Garey, Roland, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534868

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Garey, Roland, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536784

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Garey, Roland, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857221

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Garey, Roland, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834415

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Garey, Roland, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877709

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Garey, Roland, T, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878145

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Garland, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Comm/PR CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888603

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Garland, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Comm/PR CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889080

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Garland, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Comm/PR CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156304

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 333 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Garza, Rosa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888783

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Garza, Rosa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888930

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Garza, Rosa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156583

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 334 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. Garza, Rosa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

MM / DD / YYYY
08 / 25 / 2017

Transaction ID : A2017-2157147

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Garza, Rosa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2017

Transaction ID : A2017-2157769

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Garza, Rosa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

570.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2017

Transaction ID : A2017-2157591

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 335 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Garza, Rosa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 06 / 2017

Transaction ID : A2017-2571565

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Garza, Rosa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 20 / 2017

Transaction ID : A2017-2534636

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Garza, Rosa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 03 / 2017

Transaction ID : A2017-2536748

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 336 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Garza, Rosa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857184

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Garza, Rosa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834378

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Garza, Rosa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
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FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877672

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

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for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 337 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Garza, Rosa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878108

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Genau, Michael, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2688.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888504

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Genau, Michael, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2880.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889202

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

414.00

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 338 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Genau, Michael, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156519

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Genau, Michael, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3264.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157084

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Genau, Michael, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3456.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157707

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 339 OF 1014

(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Genau, Michael, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3648.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157530

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Genau, Michael, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571271

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Genau, Michael, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4032.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534576

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Genau, Michael, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4224.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536688

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Genau, Michael, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4416.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857124

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Genau, Michael, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4608.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834319

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

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 341 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Genau, Michael, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877613

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Genau, Michael, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878049

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Germanson, John, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534716

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

394.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Germanson, John, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536902

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Germanson, John, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857048

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Germanson, John, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834266

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

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 343 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Germanson, John, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877465

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Germanson, John, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877902

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gillenwater, Todd, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HEPR Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888832

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 344 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gillenwater, Todd, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HEPR Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889257

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gillenwater, Todd, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HEPR Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156633

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gillenwater, Todd, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HEPR Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157194

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 345 OF 1014

(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gillenwater, Todd, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr HEPR Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2017

Transaction ID : A2017-2158081

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gillenwater, Todd, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr HEPR Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Transaction ID : A2017-2157637

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gillenwater, Todd, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr HEPR Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

Transaction ID : A2017-2571610

Amount of Each Receipt this Period

75.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

225.00

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 346 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gillenwater, Todd, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HEPR Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534877

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gillenwater, Todd, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HEPR Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536793

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gillenwater, Todd, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HEPR Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857230

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 347 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gillenwater, Todd, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HEPR Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2833987

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gillenwater, Todd, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HEPR Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877718

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gillenwater, Todd, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HEPR Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1425.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878154

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 348 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Goodheart, Nina, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon/Diag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888737

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goodheart, Nina, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon/Diag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889220

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Goodheart, Nina, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon/Diag

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156537

Amount of Each Receipt this Period

18.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 349 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Goodheart, Nina, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon/Diag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Date of Receipt

MM / DD / YYYY
08 / 25 / 2017

Transaction ID : A2017-2157102

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goodheart, Nina, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon/Diag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2017

Transaction ID : A2017-2157725

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Goodheart, Nina, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon/Diag

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

342.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2017

Transaction ID : A2017-2157547

Amount of Each Receipt this Period

18.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 350 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Goodheart, Nina, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon/Diag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571288

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goodheart, Nina, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon/Diag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534593

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Goodheart, Nina, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon/Diag

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536705

Amount of Each Receipt this Period

18.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 351 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Goodheart, Nina, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon/Diag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857141

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goodheart, Nina, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon/Diag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834336

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Goodheart, Nina, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Mon/Diag

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877630

Amount of Each Receipt this Period

18.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 352 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Goodheart, Nina, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Patient Mon/Diag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2878066

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gover, Matthew, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Integrated Spinal Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834299

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gover, Matthew, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Integrated Spinal Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2878029

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

58.00

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 353 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Green, Eileen, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.22

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888658

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Green, Eileen, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.45

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889136

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Green, Eileen, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

307.68

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156327

Amount of Each Receipt this Period

19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.69

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 354 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Greenfield, Daniel, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP FPA Strategic Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534549

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Greenfield, Daniel, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP FPA Strategic Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536827

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Greenfield, Daniel, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP FPA Strategic Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856973

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 355 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Greenfield, Daniel, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP FPA Strategic Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834191

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Greenfield, Daniel, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP FPA Strategic Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877390

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Greenfield, Daniel, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP FPA Strategic Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877828

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 356 OF 1014

(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gurney, Kristi, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534810

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gurney, Kristi, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536559

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gurney, Kristi, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856907

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 357 OF 1014
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gurney, Kristi, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834088

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gurney, Kristi, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877559

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gurney, Kristi, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877995

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 358 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hadland, Christian, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Qual CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888596

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hadland, Christian, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Qual CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889000

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hadland, Christian, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Qual CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156725

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hadland, Christian, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Qual CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156839

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hadland, Christian, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Qual CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157846

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hadland, Christian, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Qual CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157285

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 360 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hadland, Christian, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Qual CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 06 / 2017

Transaction ID : A2017-2571378

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hadland, Christian, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Qual CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 20 / 2017

Transaction ID : A2017-2534528

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hadland, Christian, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Qual CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 03 / 2017

Transaction ID : A2017-2536647

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hadland, Christian, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Qual CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856952

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hadland, Christian, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Qual CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834171

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hadland, Christian, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Qual CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877371

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

300.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hadland, Christian, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Qual CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877809

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hafez, Adam, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534505

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hafez, Adam, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536572

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 363 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hafez, Adam, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857246

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hafez, Adam, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834132

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hafez, Adam, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877331

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 364 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hafez, Adam, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology Sr District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877735

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hagenson, Michael, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534577

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hagenson, Michael, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536689

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 365 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hagenson, Michael, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857125

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hagenson, Michael, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834320

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hagenson, Michael, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877614

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

30.00

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 366 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hagenson, Michael, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Govt Affairs Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878050

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hakami, Hooman, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2688.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888695

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hakami, Hooman, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2880.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888876

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

394.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 367 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hakami, Hooman, C, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
EVP/Group President DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156364

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hakami, Hooman, C, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
EVP/Group President DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3264.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156934

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hakami, Hooman, C, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
EVP/Group President DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3456.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157941

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

576.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 368 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hakami, Hooman, C, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
EVP/Group President DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3648.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Transaction ID : A2017-2157380

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hakami, Hooman, C, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
EVP/Group President DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3840.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

Transaction ID : A2017-2571472

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hakami, Hooman, C, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
EVP/Group President DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4032.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534715

Amount of Each Receipt this Period

192.00

☐ Memo Item**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 369 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hakami, Hooman, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4224.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536901

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hakami, Hooman, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4416.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857047

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hakami, Hooman, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4608.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834265

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 370 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hakami, Hooman, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4793.15

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877464

Amount of Each Receipt this Period

185.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hakami, Hooman, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4978.30

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877901

Amount of Each Receipt this Period

185.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hammargren, John, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156409

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

383.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 371 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hanson, Bryan, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2688.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888580

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hanson, Bryan, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2880.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888984

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hanson, Bryan, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156710

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 372 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hanson, Bryan, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3264.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156824

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hanson, Bryan, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3456.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157831

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Hanson, Bryan, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3648.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157270

Amount of Each Receipt this Period

192.00

☐ Memo Item

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 373 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hanson, Bryan, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3840.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571363

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hanson, Bryan, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4032.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534501

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hanson, Bryan, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4224.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536632

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 374 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hanson, Bryan, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4416.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857305

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hanson, Bryan, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4608.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834128

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hanson, Bryan, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877309

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hanson, Bryan, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877794

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hanson, John, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156979

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hanson, John, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157986

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

216.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hanson, John, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157425

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hanson, John, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571516

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hanson, John, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534759

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

36.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hanson, John, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536510

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hanson, John, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857092

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hanson, John, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834039

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

36.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 378 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hanson, John, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877509

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hanson, John, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Sourcing Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877946

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Harkin, Thomas, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1043.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888824

Amount of Each Receipt this Period

74.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

98.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Harkin, Thomas, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1117.50

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889249

Amount of Each Receipt this Period

74.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Harkin, Thomas, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1192.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156625

Amount of Each Receipt this Period

74.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Harris, David, , Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Aortic District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888629

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

169.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 380 OF 1014

(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Harris, David, , Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Aortic District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	D D	Y Y Y Y
07	28	2017

Transaction ID : A2017-1889107

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Harris, David, , Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Aortic District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M	D D	Y Y Y Y
08	11	2017

Transaction ID : A2017-2156757

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Harris, David, , Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Aortic District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M	D D	Y Y Y Y
08	25	2017

Transaction ID : A2017-2156870

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Harris, David, , Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Aortic District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157877

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Harris, David, , Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Aortic District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157316

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Harris, David, , Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Aortic District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571408

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Harris, David, , Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Aortic District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534651

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Harris, David, , Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Aortic District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536837

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Harris, David, , Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Aortic District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856983

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Harris, David, , Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Aortic District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834201

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Harris, David, , Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Aortic District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877400

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Harris, David, , Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Aortic District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877838

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Heilmann Camillo, Holly, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888694

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Heilmann Camillo, Holly, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888875

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Heilmann Camillo, Holly, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156363

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 385 OF 1014

(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Heilmann Camillo, Holly, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M	D D	Y Y Y Y
08	25	2017

Transaction ID : A2017-2156933

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Heilmann Camillo, Holly, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M	D D	Y Y Y Y
09	08	2017

Transaction ID : A2017-2157940

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Heilmann Camillo, Holly, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M	D D	Y Y Y Y
09	22	2017

Transaction ID : A2017-2157379

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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 386 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Heilmann Camillo, Holly, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571471

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Heilmann Camillo, Holly, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534714

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Heilmann Camillo, Holly, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536900

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 387 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Heilmann Camillo, Holly, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857046

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Heilmann Camillo, Holly, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834264

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Heilmann Camillo, Holly, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877463

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Heilmann Camillo, Holly, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877900

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Heinks, Michael, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2878038

Amount of Each Receipt this Period

8.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Heird, Edna, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2017

Transaction ID : A2017-1888655

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

53.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Heird, Edna, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889133

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Heird, Edna, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156324

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Heird, Edna, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156896

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

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 390 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Heird, Edna, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2017

Transaction ID : A2017-2157903

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Heird, Edna, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2017

Transaction ID : A2017-2157342

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Heird, Edna, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
10 / 06 / 2017

Transaction ID : A2017-2571434

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

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 391 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Heird, Edna, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534677

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Heird, Edna, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536863

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Heird, Edna, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857009

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 392 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Heird, Edna, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834227

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Heird, Edna, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877426

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Heird, Edna, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877864

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Henke, Tom, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888834

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Henke, Tom, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889259

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Henke, Tom, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156635

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Henke, Tom, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157196

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Henke, Tom, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2158083

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Henke, Tom, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

570.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157639

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. Henke, Tom, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571612

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Henke, Tom, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534879

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Henke, Tom, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536795

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 396 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Henke, Tom, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857232

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Henke, Tom, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2833989

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Henke, Tom, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877720

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

90.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 397 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Henke, Tom, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878156

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hilke, Deborah, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Legal Counsel IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534660

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hilke, Deborah, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Legal Counsel IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536846

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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PAGE 398 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
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A. Hilke, Deborah, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Legal Counsel IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2856992

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hilke, Deborah, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Legal Counsel IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834210

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hilke, Deborah, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Legal Counsel IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877409

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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A. Hilke, Deborah, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Legal Counsel IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877847

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hoekstra, Doug, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888649

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hoekstra, Doug, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889127

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hoekstra, Doug, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156318

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hoekstra, Doug, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156890

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hoekstra, Doug, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157897

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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 401 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hoekstra, Doug, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157336

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hoekstra, Doug, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571428

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hoekstra, Doug, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534671

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 402 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hoekstra, Doug, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536857

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hoekstra, Doug, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857003

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hoekstra, Doug, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834221

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 403 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hoekstra, Doug, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Corp Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2017

Transaction ID : A2017-2877420

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hoekstra, Doug, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Corp Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2017

Transaction ID : A2017-2877858

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Holmes, William, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2017

Transaction ID : A2017-1888574

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

200.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 404 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Holmes, William, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888978

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Holmes, William, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156704

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Holmes, William, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156819

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

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 405 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Holmes, William, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157826

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Holmes, William, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157265

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Holmes, William, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

10 / 06 / 2017

Transaction ID : A2017-2571358

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

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 406 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Holmes, William, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534496

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Holmes, William, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536627

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Holmes, William, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857300

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Holmes, William, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834123

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Holmes, William, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877322

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Holmes, William, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877789

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 408 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hosea, Michael, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
07	/	14	/	2017

Transaction ID : A2017-1888650

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hosea, Michael, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
07	/	28	/	2017

Transaction ID : A2017-1889128

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hosea, Michael, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08	/	11	/	2017

Transaction ID : A2017-2156319

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hosea, Michael, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156891

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hosea, Michael, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157898

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hosea, Michael, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157337

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 410 OF 1014

(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hosea, Michael, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571429

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hosea, Michael, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534672

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hosea, Michael, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536858

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

60.00

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 411 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hosea, Michael, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857004

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hosea, Michael, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834222

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hosea, Michael, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877421

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hosea, Michael, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877859

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Houser, Ann, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888544

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Houser, Ann, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889298

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 413 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Houser, Ann, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP HR CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156674

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Houser, Ann, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP HR CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156789

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Houser, Ann, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP HR CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157796

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

240.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Houser, Ann, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157235

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Houser, Ann, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571328

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Houser, Ann, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534466

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

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 415 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
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State
MN

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FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536597

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Houser, Ann, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1761.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857271

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Houser, Ann, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1762.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834157

Amount of Each Receipt this Period

1.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

82.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 416 OF 1014

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Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1763.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877327

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Houser, Ann, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1764.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877760

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Howard, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Systems Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534761

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Systems Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536512

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Howard, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Systems Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857094

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Howard, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Systems Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834041

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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PAGE 418 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Howard, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Systems Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877511

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Howard, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Systems Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877948

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Huber, Jonathan, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888414

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 419 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Huber, Jonathan, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889037

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Huber, Jonathan, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156426

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Huber, Jonathan, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156995

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 420 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Huber, Jonathan, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2158002

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Huber, Jonathan, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157441

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Huber, Jonathan, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571532

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 421 OF 1014

<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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City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534775

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Huber, Jonathan, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : A2017-2536526

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Huber, Jonathan, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2017

Transaction ID : A2017-2857108

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Huber, Jonathan, J, ,

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City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834055

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Huber, Jonathan, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877525

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Huber, Jonathan, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877962

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Humes, Joan, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Chief Dpty GC Corp Funct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888731

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Humes, Joan, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Chief Dpty GC Corp Funct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889012

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Humes, Joan, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Chief Dpty GC Corp Funct

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156401

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Humes, Joan, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Dpty GC Corp Funct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156971

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Humes, Joan, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Dpty GC Corp Funct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157978

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Humes, Joan, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Dpty GC Corp Funct

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1520.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157417

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Humes, Joan, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Dpty GC Corp Funct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571508

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Humes, Joan, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Dpty GC Corp Funct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534751

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Humes, Joan, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Dpty GC Corp Funct

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536502

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Humes, Joan, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP/Chief Dpty GC Corp Funct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1840.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857084

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Humes, Joan, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)

VP/Chief Dpty GC Corp Funct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834031

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Humes, Joan, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)

VP/Chief Dpty GC Corp Funct

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877501

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Humes, Joan, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Dpty GC Corp Funct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877938

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hutchins, Hanna, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888690

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hutchins, Hanna, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888871

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hutchins, Hanna, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156359

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hutchins, Hanna, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156929

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hutchins, Hanna, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157936

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hutchins, Hanna, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157375

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hutchins, Hanna, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571467

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hutchins, Hanna, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534710

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hutchins, Hanna, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536896

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hutchins, Hanna, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857042

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hutchins, Hanna, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834260

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hutchins, Hanna, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877459

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hutchins, Hanna, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877896

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Iseman, Wayne, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888657

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Iseman, Wayne, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889135

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Iseman, Wayne, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156326

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Iseman, Wayne, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156898

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 433 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Iseman, Wayne, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157905

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Iseman, Wayne, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157344

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Iseman, Wayne, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571436

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

75.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Iseman, Wayne, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534679

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Iseman, Wayne, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536865

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Iseman, Wayne, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857011

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 435 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Iseman, Wayne, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834229

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Iseman, Wayne, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877428

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Iseman, Wayne, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877866

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

75.00

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 436 OF 1014
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ishrak, Syed, O, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Chairman and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 11 / 2017

Transaction ID : A2017-3083786

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Iturriaga, Enrique, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Medical Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888663

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Iturriaga, Enrique, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Medical Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889141

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5100.00

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 437 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Iturriaga, Enrique, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Medical Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156332

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Iturriaga, Enrique, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Medical Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156903

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Iturriaga, Enrique, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Medical Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157910

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 438 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Iturriaga, Enrique, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Medical Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157349

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Iturriaga, Enrique, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Medical Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571441

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Iturriaga, Enrique, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Medical Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534684

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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 439 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Iturriaga, Enrique, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Medical Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536870

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Iturriaga, Enrique, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Medical Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857016

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Iturriaga, Enrique, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Medical Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834234

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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 440 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Iturriaga, Enrique, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Medical Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877433

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Iturriaga, Enrique, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Medical Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877870

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jansen, Peter, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr EHS Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888759

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 441 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jansen, Peter, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr EHS Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : A2017-1888906

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jansen, Peter, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr EHS Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Transaction ID : A2017-2156559

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jansen, Peter, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr EHS Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2017

Transaction ID : A2017-2157124

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 442 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jansen, Peter, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr EHS Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157747

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jansen, Peter, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr EHS Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157569

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jansen, Peter, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr EHS Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571543

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 443 OF 1014

(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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A. Jansen, Peter, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr EHS Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	20	2017

Transaction ID : A2017-2534614

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jansen, Peter, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr EHS Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	03	2017

Transaction ID : A2017-2536726

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jansen, Peter, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr EHS Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	17	2017

Transaction ID : A2017-2857162

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. Jansen, Peter, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr EHS Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834356

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jansen, Peter, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr EHS Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877650

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jansen, Peter, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr EHS Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878086

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 445 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Johnson, Darrell, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Data Science/Bus Sol SSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M	D D	Y Y Y Y
07	14	2017

Transaction ID : A2017-1888621

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Johnson, Darrell, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
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federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Data Science/Bus Sol SSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	D D	Y Y Y Y
07	28	2017

Transaction ID : A2017-1889099

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Johnson, Darrell, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Data Science/Bus Sol SSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M	D D	Y Y Y Y
08	11	2017

Transaction ID : A2017-2156750

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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A. Johnson, Darrell, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Data Science/Bus Sol SSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156864

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Johnson, Darrell, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Data Science/Bus Sol SSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157871

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Johnson, Darrell, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Data Science/Bus Sol SSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157310

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 447 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Johnson, Darrell, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Data Science/Bus Sol SSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571402

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Johnson, Darrell, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Data Science/Bus Sol SSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534645

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Johnson, Darrell, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Data Science/Bus Sol SSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536831

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 448 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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MN

Zip Code
55432

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Data Science/Bus Sol SSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2856977

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Johnson, Darrell, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

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MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Data Science/Bus Sol SSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834195

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Johnson, Darrell, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Data Science/Bus Sol SSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877394

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

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 449 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. Johnson, Darrell, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
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State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Data Science/Bus Sol SSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877832

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Johnson, Patrick, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888750

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Johnson, Patrick, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889233

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 450 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Johnson, Patrick, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156550

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Johnson, Patrick, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157115

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Johnson, Patrick, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157738

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

75.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Johnson, Patrick, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157560

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Johnson, Patrick, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571301

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Johnson, Patrick, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534606

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Johnson, Patrick, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536718

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Johnson, Patrick, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857154

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Johnson, Patrick, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834348

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 453 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Johnson, Patrick, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877642

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Johnson, Patrick, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Regulatory Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878078

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jones, Michelle, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888499

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 454 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jones, Michelle, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889197

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jones, Michelle, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156514

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jones, Michelle, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157079

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

75.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jones, Michelle, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157702

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jones, Michelle, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157525

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jones, Michelle, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571266

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jones, Michelle, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534571

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jones, Michelle, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536683

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jones, Michelle, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857119

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 457 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jones, Michelle, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834314

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jones, Michelle, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877608

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jones, Michelle, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878044

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 458 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jordan, John, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888401

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jordan, John, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889024

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jordan, John, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156413

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

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 459 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jordan, John, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156982

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jordan, John, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157989

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jordan, John, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157428

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 460 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jordan, John, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571519

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jordan, John, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)

Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534762

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jordan, John, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)

Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536513

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jordan, John, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857095

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jordan, John, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834042

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jordan, John, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877512

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jordan, John, A, ,

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MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877949

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Joyce, Patrick, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT Gbl Privacy Secrty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888751

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Joyce, Patrick, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT Gbl Privacy Secrty

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889234

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

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A. Joyce, Patrick, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT Gbl Privacy Secrty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156551

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Joyce, Patrick, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT Gbl Privacy Secrty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157116

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Joyce, Patrick, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT Gbl Privacy Secrty

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157739

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Joyce, Patrick, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP IT Gbl Privacy Secrty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2017

Transaction ID : A2017-2157561

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Joyce, Patrick, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP IT Gbl Privacy Secrty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2017

Transaction ID : A2017-2571302

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Joyce, Patrick, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP IT Gbl Privacy Secrty

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

Transaction ID : A2017-2534607

Amount of Each Receipt this Period

40.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Joyce, Patrick, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

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MN

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT Gbl Privacy Secrty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536719

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Joyce, Patrick, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT Gbl Privacy Secrty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857155

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Joyce, Patrick, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT Gbl Privacy Secrty

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834349

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Joyce, Patrick, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT Gbl Privacy Secrty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877643

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Joyce, Patrick, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT Gbl Privacy Secrty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878079

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kalman, Mikhail, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888510

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 467 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kalman, Mikhail, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889208

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kalman, Mikhail, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156525

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kalman, Mikhail, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157090

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 468 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kalman, Mikhail, , ,

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157713

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kalman, Mikhail, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

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MN

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157535

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kalman, Mikhail, , ,

Mailing Address 710 Medtronic Parkway NE

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Minneapolis

State
MN

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FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571276

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 469 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kalman, Mikhail, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534581

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kalman, Mikhail, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536693

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kalman, Mikhail, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857129

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kalman, Mikhail, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834324

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kalman, Mikhail, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877618

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kalman, Mikhail, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878054

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kalter, Sandra, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Reg Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888786

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kalter, Sandra, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Reg Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888934

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kalter, Sandra, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Reg Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156587

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Reg Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157151

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kalter, Sandra, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Reg Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2158039

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kalter, Sandra, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Reg Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157595

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Reg Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571568

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kalter, Sandra, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Reg Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534640

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kalter, Sandra, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Reg Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536751

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Reg Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857188

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kalter, Sandra, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Reg Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834382

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kalter, Sandra, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Reg Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877676

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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PAGE 475 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kalter, Sandra, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Reg Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878112

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kelley, Ellen, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Technical Consultant Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888661

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kelley, Ellen, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Technical Consultant Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889139

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 476 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kelley, Ellen, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Technical Consultant Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156330

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kelley, Ellen, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Technical Consultant Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156901

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kelley, Ellen, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Technical Consultant Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157908

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 477 OF 1014

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A. Kelley, Ellen, K, ,

Mailing Address 710 Medtronic Parkway NE

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Minneapolis

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MN

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55432

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Technical Consultant Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157347

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kelley, Ellen, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Technical Consultant Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571439

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kelley, Ellen, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Technical Consultant Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534682

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 478 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Technical Consultant Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536868

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kelley, Ellen, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Technical Consultant Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857014

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kelley, Ellen, K, ,

Mailing Address 710 Medtronic Parkway NE

City
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MN

Zip Code
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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Technical Consultant Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834232

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 479 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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MN

Zip Code
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FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Technical Consultant Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877431

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kelley, Ellen, K, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Technical Consultant Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877868

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. King, Christopher, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156726

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. King, Christopher, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156840

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. King, Christopher, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157847

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. King, Christopher, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157286

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. King, Christopher, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

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55432

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571379

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. King, Christopher, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534529

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. King, Christopher, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536648

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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A. King, Christopher, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856953

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. King, Christopher, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834172

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. King, Christopher, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877372

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877810

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. King, Denise, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER Benefits COE/TR Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888640

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. King, Denise, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER Benefits COE/TR Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889118

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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53.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. King, Denise, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER Benefits COE/TR Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156309

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. King, Denise, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER Benefits COE/TR Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156881

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. King, Denise, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER Benefits COE/TR Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157888

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Medtronic Inc. PAC

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A. King, Denise, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER Benefits COE/TR Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157327

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. King, Denise, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER Benefits COE/TR Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571419

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. King, Denise, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER Benefits COE/TR Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534662

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP AMER Benefits COE/TR Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 03 / 2017

Transaction ID : A2017-2536848

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. King, Denise, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP AMER Benefits COE/TR Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2856994

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. King, Denise, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP AMER Benefits COE/TR Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834212

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. King, Denise, K, Ms.,

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City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER Benefits COE/TR Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877411

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. King, Denise, K, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER Benefits COE/TR Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877849

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. King, Douglas, J, Mr.,

Mailing Address 1800 Pyramid Pl
Bldg C

City
Memphis

State
TN

Zip Code
38132-1703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President Spine

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888651

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. King, Douglas, J, Mr.,

Mailing Address 1800 Pyramid Pl
Bldg C

City
Memphis

State
TN

Zip Code
38132-1703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President Spine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889129

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. King, Douglas, J, Mr.,

Mailing Address 1800 Pyramid Pl
Bldg C

City
Memphis

State
TN

Zip Code
38132-1703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President Spine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156320

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. King, Douglas, J, Mr.,

Mailing Address 1800 Pyramid Pl
Bldg C

City
Memphis

State
TN

Zip Code
38132-1703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President Spine

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156892

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. King, Douglas, J, Mr.,

Mailing Address 1800 Pyramid Pl
Bldg C

City
Memphis

State
TN

Zip Code
38132-1703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President Spine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2017

Transaction ID : A2017-2157899

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. King, Douglas, J, Mr.,

Mailing Address 1800 Pyramid Pl
Bldg C

City
Memphis

State
TN

Zip Code
38132-1703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President Spine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2017

Transaction ID : A2017-2157338

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. King, Douglas, J, Mr.,

Mailing Address 1800 Pyramid Pl
Bldg C

City
Memphis

State
TN

Zip Code
38132-1703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President Spine

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
10 / 06 / 2017

Transaction ID : A2017-2571430

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 490 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. King, Douglas, J, Mr.,Mailing Address 1800 Pyramid Pl
Bldg CCity
MemphisState
TNZip Code
38132-1703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President Spine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534673

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. King, Douglas, J, Mr.,Mailing Address 1800 Pyramid Pl
Bldg CCity
MemphisState
TNZip Code
38132-1703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President Spine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : A2017-2536859

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. King, Douglas, J, Mr.,Mailing Address 1800 Pyramid Pl
Bldg CCity
MemphisState
TNZip Code
38132-1703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President Spine

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2017

Transaction ID : A2017-2857005

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

75.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 491 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. King, Douglas, J, Mr.,Mailing Address 1800 Pyramid Pl
Bldg CCity
MemphisState
TNZip Code
38132-1703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President Spine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834223

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. King, Douglas, J, Mr.,Mailing Address 1800 Pyramid Pl
Bldg CCity
MemphisState
TNZip Code
38132-1703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President Spine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877422

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. King, Douglas, J, Mr.,Mailing Address 1800 Pyramid Pl
Bldg CCity
MemphisState
TNZip Code
38132-1703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President Spine

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877860

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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 492 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Klein, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Procurement Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888402

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Klein, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Procurement Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889025

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Klein, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Procurement Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156414

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 493 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Klein, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Chief Procurement Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156983

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Klein, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Chief Procurement Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157990

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Klein, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Chief Procurement Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157429

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 494 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Klein, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Procurement Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571520

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Klein, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Procurement Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534763

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Klein, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Procurement Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536514

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 495 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Klein, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP/Chief Procurement Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2017

Transaction ID : A2017-2857096

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Klein, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP/Chief Procurement Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834043

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Klein, John, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP/Chief Procurement Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877513

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 496 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Klein, John, M.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Procurement Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877950

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kline, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534805

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kline, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536555

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 497 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kline, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2856903

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kline, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834084

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kline, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877555

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 498 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kline, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877991

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Knight, Heather, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Colorectal Health SI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888691

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Knight, Heather, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Colorectal Health SI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888872

Amount of Each Receipt this Period

50.00

☐ Memo Item

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 499 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Knight, Heather, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Colorectal Health SI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156360

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Knight, Heather, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Colorectal Health SI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156930

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Knight, Heather, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Colorectal Health SI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157937

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 500 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Knight, Heather, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Colorectal Health SI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157376

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Knight, Heather, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Colorectal Health SI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571468

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Knight, Heather, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Colorectal Health SI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534711

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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 501 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Knight, Heather, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Colorectal Health SI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536897

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Knight, Heather, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Colorectal Health SI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857043

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Knight, Heather, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Colorectal Health SI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834261

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 502 OF 1014
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Knight, Heather, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Colorectal Health SI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877460

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Knight, Heather, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Colorectal Health SI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877897

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kolb, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

538.44

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888493

Amount of Each Receipt this Period

38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

138.46

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 503 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kolb, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : A2017-1889191

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kolb, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Transaction ID : A2017-2156508

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kolb, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

653.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2017

Transaction ID : A2017-2157074

Amount of Each Receipt this Period

38.46

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

115.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 504 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kolb, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.28

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157697

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kolb, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.74

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157520

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kolb, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571261

Amount of Each Receipt this Period

38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.38

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 505 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kolb, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

807.66

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534566

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kolb, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536678

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kolb, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

884.58

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856951

Amount of Each Receipt this Period

38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.38

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 506 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kolb, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834309

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kolb, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877603

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kolb, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878039

Amount of Each Receipt this Period

38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.38

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 507 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Koshiol, Stephanie, R, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IT Bus Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878135

Amount of Each Receipt this Period

8.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kramer, Angela, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888540

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kramer, Angela, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889294

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

108.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 508 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kramer, Angela, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156670

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kramer, Angela, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156785

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kramer, Angela, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157792

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 509 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kramer, Angela, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157231

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kramer, Angela, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571324

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kramer, Angela, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534462

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 510 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kramer, Angela, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : A2017-2536593

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kramer, Angela, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2017

Transaction ID : A2017-2857267

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kramer, Angela, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2017

Transaction ID : A2017-2834153

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kramer, Angela, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877323

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kramer, Angela, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877556

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Landon, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888598

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 512 OF 1014

(check only one)

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Landon, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889075

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Landon, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156727

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Landon, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156841

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 513 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Landon, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157848

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Landon, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157287

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Landon, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571380

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 514 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Landon, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534530

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Landon, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1760.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536809

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Landon, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1840.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856954

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

240.00

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 515 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Landon, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834173

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Landon, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877373

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Landon, Christopher, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877811

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

240.00

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:
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PAGE 516 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lankiewicz, Julie, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Medical Affairs Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

07 / 14 / 2017

Transaction ID : A2017-1888420

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lankiewicz, Julie, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Medical Affairs Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 28 / 2017

Transaction ID : A2017-1889043

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lankiewicz, Julie, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Medical Affairs Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156432

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 517 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Laske, Timothy, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Research AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888828

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Laske, Timothy, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Research AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889253

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Laske, Timothy, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Research AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156629

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 518 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Laske, Timothy, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Research AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157190

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Laske, Timothy, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Research AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2158077

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Laske, Timothy, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Research AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

361.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157633

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Laske, Timothy, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Research AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

Transaction ID : A2017-2571606

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Laske, Timothy, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Research AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534873

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Laske, Timothy, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Research AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

418.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : A2017-2536789

Amount of Each Receipt this Period

19.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Laske, Timothy, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Research AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857226

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Laske, Timothy, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Research AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2833983

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Laske, Timothy, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Research AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877714

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 521 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Laske, Timothy, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Research AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2878150

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Leday, Andrie, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sales Prog Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2017

Transaction ID : A2017-1888536

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Leday, Andrie, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sales Prog Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2017

Transaction ID : A2017-1889290

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

79.00

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 522 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Leday, Andrie, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Prog Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156666

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Leday, Andrie, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Prog Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156781

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Leday, Andrie, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Prog Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157788

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 523 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Leday, Andrie, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Prog Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157227

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Leday, Andrie, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Prog Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571320

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Leday, Andrie, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Prog Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534458

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

90.00

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 524 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Leday, Andrie, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sales Prog Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536589

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Leday, Andrie, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sales Prog Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857263

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Leday, Andrie, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sales Prog Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834149

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

90.00

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 525 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Leday, Andrie, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sales Prog Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877348

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Leday, Andrie, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sales Prog Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877752

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Leith, Joanne, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888732

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

85.00

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 526 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Leith, Joanne, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889013

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Leith, Joanne, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156402

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Leith, Joanne, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156972

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 527 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Leith, Joanne, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157979

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Leith, Joanne, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157418

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Leith, Joanne, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571509

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

75.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534752

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Leith, Joanne, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536503

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Leith, Joanne, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857085

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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MN

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834032

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Leith, Joanne, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877502

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Leith, Joanne, H, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877939

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 530 OF 1014
(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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A. Lerman, Bradley, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP Genl Couns/Corp Secr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2688.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2017

Transaction ID : A2017-1888567

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lerman, Bradley, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP Genl Couns/Corp Secr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2880.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : A2017-1888971

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lerman, Bradley, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP Genl Couns/Corp Secr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Transaction ID : A2017-2156697

Amount of Each Receipt this Period

192.00

☐ Memo Item**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:
(check only one)

PAGE 531 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP Genl Couns/Corp Secr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3264.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156812

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lerman, Bradley, E, ,

Mailing Address 710 Medtronic Parkway NE

City
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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP Genl Couns/Corp Secr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3456.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157819

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lerman, Bradley, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP Genl Couns/Corp Secr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3648.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157258

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 532 OF 1014

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A. Lerman, Bradley, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP Genl Couns/Corp Secr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3840.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571351

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lerman, Bradley, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP Genl Couns/Corp Secr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4032.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534489

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lerman, Bradley, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP Genl Couns/Corp Secr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4224.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536620

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 533 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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MN

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federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP Genl Couns/Corp Secr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4416.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857293

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lerman, Bradley, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

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MN

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP Genl Couns/Corp Secr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4608.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834116

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lerman, Bradley, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP Genl Couns/Corp Secr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877315

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 534 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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MN

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55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP Genl Couns/Corp Sec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877782

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Levinson, Jenifer, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HCEcon/Pol/Reimb MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

802.90

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888715

Amount of Each Receipt this Period

57.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Levinson, Jenifer, , ,

Mailing Address 710 Medtronic Parkway NE

City
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MN

Zip Code
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FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HCEcon/Pol/Reimb MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

861.40

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888897

Amount of Each Receipt this Period

58.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

307.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 535 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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C

Name of Employer (for Individual)
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Occupation (for Individual)
VP HCEcon/Pol/Reimb MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

919.90

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156385

Amount of Each Receipt this Period

58.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Levinson, Jenifer, , ,

Mailing Address 710 Medtronic Parkway NE

City
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C

Name of Employer (for Individual)
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Occupation (for Individual)
VP HCEcon/Pol/Reimb MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

978.40

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156955

Amount of Each Receipt this Period

58.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Levinson, Jenifer, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HCEcon/Pol/Reimb MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1036.90

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157962

Amount of Each Receipt this Period

58.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 536 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Levinson, Jenifer, , ,

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City
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C

Name of Employer (for Individual)
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Occupation (for Individual)
VP HCEcon/Pol/Reimb MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1095.40

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157401

Amount of Each Receipt this Period

58.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Levinson, Jenifer, , ,

Mailing Address 710 Medtronic Parkway NE

City
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State
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Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HCEcon/Pol/Reimb MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.90

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571492

Amount of Each Receipt this Period

58.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Levinson, Jenifer, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HCEcon/Pol/Reimb MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1212.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534735

Amount of Each Receipt this Period

58.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 537 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Levinson, Jenifer, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP HCEcon/Pol/Reimb MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1270.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536921

Amount of Each Receipt this Period

58.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Levinson, Jenifer, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP HCEcon/Pol/Reimb MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1329.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857068

Amount of Each Receipt this Period

58.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Levinson, Jenifer, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP HCEcon/Pol/Reimb MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1387.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834015

Amount of Each Receipt this Period

58.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

175.50

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Levinson, Jenifer, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HCEcon/Pol/Reimb MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1446.40

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877485

Amount of Each Receipt this Period

58.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Levinson, Jenifer, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HCEcon/Pol/Reimb MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1504.90

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877922

Amount of Each Receipt this Period

58.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Linden, Paul, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888666

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

137.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 539 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Linden, Paul, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889144

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Linden, Paul, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156335

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Linden, Paul, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156906

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Linden, Paul, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2017

Transaction ID : A2017-2157913

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Linden, Paul, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2017

Transaction ID : A2017-2157352

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Linden, Paul, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
10 / 06 / 2017

Transaction ID : A2017-2571444

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

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 541 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Linden, Paul, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534687

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Linden, Paul, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536873

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Linden, Paul, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857019

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 542 OF 1014
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Linden, Paul, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834237

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Linden, Paul, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877436

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Linden, Paul, E, Mr., Jr.

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Manufacturing Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877873

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 543 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lomel, Charles, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156722

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lomel, Charles, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156836

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lomel, Charles, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157843

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 544 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lomel, Charles, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2017

Transaction ID : A2017-2157282

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lomel, Charles, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2017

Transaction ID : A2017-2571375

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lomel, Charles, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

Transaction ID : A2017-2534525

Amount of Each Receipt this Period

13.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

39.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 545 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lomel, Charles, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536644

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lomel, Charles, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857317

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lomel, Charles, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834168

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lomel, Charles, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877368

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lomel, Charles, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877806

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Loth, Christine, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888595

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

76.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 547 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Loth, Christine, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888999

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Loth, Christine, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156724

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Loth, Christine, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156838

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Loth, Christine, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157845

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Loth, Christine, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157284

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Loth, Christine, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571377

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 549 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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A. Loth, Christine, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534527

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Loth, Christine, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536646

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Loth, Christine, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857319

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 550 OF 1014

(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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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Loth, Christine, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834170

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Loth, Christine, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877370

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Loth, Christine, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877808

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Luttrell, Alexis, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534513

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Luttrell, Alexis, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536580

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Luttrell, Alexis, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857254

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Medtronic Inc. PAC

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A. Luttrell, Alexis, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834140

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Luttrell, Alexis, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877339

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Luttrell, Alexis, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877743

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 553 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mallon, Jaime, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888698

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mallon, Jaime, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888879

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mallon, Jaime, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156367

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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 554 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mallon, Jaime, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156937

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mallon, Jaime, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157944

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mallon, Jaime, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157383

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 555 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mallon, Jaime, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571475

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mallon, Jaime, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534718

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mallon, Jaime, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536904

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mallon, Jaime, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857050

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mallon, Jaime, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834268

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mallon, Jaime, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877467

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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)

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A. Mallon, Jaime, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IT AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877904

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mann, Brek, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888570

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mann, Brek, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888974

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<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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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mann, Brek, S, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP National Sales Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Transaction ID : A2017-2156700

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mann, Brek, S, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP National Sales Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2017

Transaction ID : A2017-2156815

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mann, Brek, S, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP National Sales Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2017

Transaction ID : A2017-2157822

Amount of Each Receipt this Period

150.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

450.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mann, Brek, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2850.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157261

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mann, Brek, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571354

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mann, Brek, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3150.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534492

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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A. Mann, Brek, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536623

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mann, Brek, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3450.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857296

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mann, Brek, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834119

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mann, Brek, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877318

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mann, Brek, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales Diagnostics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3900.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877785

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Marczyk, Stanislaw, Z, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Distinguished Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888806

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

320.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 562 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. Marczyk, Stanislaw, Z, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Distinguished Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888954

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Marczyk, Stanislaw, Z, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Distinguished Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156607

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Marczyk, Stanislaw, Z, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Distinguished Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157171

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Marczyk, Stanislaw, Z, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Distinguished Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2158059

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Marczyk, Stanislaw, Z, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Distinguished Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157615

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Marczyk, Stanislaw, Z, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Distinguished Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571588

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Marczyk, Stanislaw, Z, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Distinguished Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534855

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Marczyk, Stanislaw, Z, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Distinguished Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536771

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Marczyk, Stanislaw, Z, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Distinguished Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857208

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Marczyk, Stanislaw, Z, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Distinguished Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834402

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Marczyk, Stanislaw, Z, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Distinguished Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877696

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Marczyk, Stanislaw, Z, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Distinguished Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2878132

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Marks, Keith, R.,

Mailing Address 8200 Coral Sea Street NE

City

Mounds View

State

MN

Zip Code

55112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

IT Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877980

Amount of Each Receipt this Period

8.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Marottolo, Frank, C.,

Mailing Address 710 Medtronic Parkway NE

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534693

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Marottolo, Frank, C.,

Mailing Address 710 Medtronic Parkway NE

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536879

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Marottolo, Frank, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857025

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Marottolo, Frank, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834243

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Marottolo, Frank, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877442

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

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)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Marottolo, Frank, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877879

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Martha, Geoffrey, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2688.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888678

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Martha, Geoffrey, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2880.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888859

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

394.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Martha, Geoffrey, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156347

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Martha, Geoffrey, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3264.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156918

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Martha, Geoffrey, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3456.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157925

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Martha, Geoffrey, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
EVP/Group President RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3648.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157364

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Martha, Geoffrey, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
EVP/Group President RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571456

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Martha, Geoffrey, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
EVP/Group President RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4032.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534699

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

576.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Martha, Geoffrey, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4224.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536885

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Martha, Geoffrey, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4416.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857031

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Martha, Geoffrey, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4608.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834249

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Martha, Geoffrey, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877448

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Martha, Geoffrey, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Group President RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877885

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Martinez, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534781

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

394.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Martinez, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 03 / 2017

Transaction ID : A2017-2536532

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Martinez, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857114

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Martinez, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834061

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Martinez, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877531

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Martinez, Julie, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Sales Rep - InterStim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877968

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mathias, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales HVT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888507

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

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 575 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mathias, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales HVT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889205

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mathias, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales HVT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156522

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mathias, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales HVT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157087

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 576 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mathias, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP National Sales HVT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157710

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mathias, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP National Sales HVT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157533

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mathias, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP National Sales HVT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571274

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

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 577 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mathias, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales HVT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534579

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mathias, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales HVT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536691

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mathias, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales HVT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857127

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 578 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mathias, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales HVT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834322

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mathias, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales HVT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877616

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mathias, Michael, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP National Sales HVT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878052

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

75.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Matous, Geoffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157927

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Matous, Geoffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157366

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Matous, Geoffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571458

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Matous, Geoffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534701

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Matous, Geoffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536887

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Matous, Geoffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857033

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 581 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Matous, Geoffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834251

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Matous, Geoffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877450

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Matous, Geoffrey, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Neuro ENT DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877887

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 582 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. May, Damian, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Rgl Reimbursement Econ Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888616

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. May, Damian, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Rgl Reimbursement Econ Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889094

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. May, Damian, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Rgl Reimbursement Econ Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156745

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 583 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. May, Damian, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Rgl Reimbursement Econ Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156859

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. May, Damian, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Rgl Reimbursement Econ Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157866

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. May, Damian, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Rgl Reimbursement Econ Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157305

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 584 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. May, Damian, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Rgl Reimbursement Econ Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571397

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. May, Damian, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Rgl Reimbursement Econ Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534548

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. May, Damian, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Rgl Reimbursement Econ Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536826

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 585 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. May, Damian, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Rgl Reimbursement Econ Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856972

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. May, Damian, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Rgl Reimbursement Econ Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834190

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. May, Damian, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Rgl Reimbursement Econ Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877389

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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 586 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
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A. May, Damian, , ,

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City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Rgl Reimbursement Econ Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877827

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mayo, Rhonda, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888768

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mayo, Rhonda, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888915

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 587 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mayo, Rhonda, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156568

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mayo, Rhonda, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157133

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mayo, Rhonda, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157756

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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 588 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
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A. Mayo, Rhonda, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157578

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mayo, Rhonda, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571552

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mayo, Rhonda, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534623

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 589 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mayo, Rhonda, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2017

Transaction ID : A2017-2536735

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mayo, Rhonda, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2017

Transaction ID : A2017-2857171

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mayo, Rhonda, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834365

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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:
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PAGE 590 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mayo, Rhonda, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877659

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mayo, Rhonda, D, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878095

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McCarthy, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IHS AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888404

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

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 591 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McCarthy, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IHS AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889027

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McCarthy, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IHS AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156416

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McCarthy, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IHS AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156985

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 592 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McCarthy, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IHS AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157992

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McCarthy, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IHS AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157431

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McCarthy, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IHS AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571522

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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 593 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McCarthy, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IHS AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534765

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McCarthy, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IHS AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536516

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McCarthy, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IHS AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857098

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 594 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McCarthy, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IHS AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834045

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McCarthy, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IHS AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877515

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McCarthy, John, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP IHS AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877952

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 595 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McDonald, John, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
National Sales Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2017

Transaction ID : A2017-1888405

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McDonald, John, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
National Sales Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2017

Transaction ID : A2017-1889028

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McDonald, John, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
National Sales Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	11	/	2017

Transaction ID : A2017-2156417

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 596 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McDonald, John, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Sales Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

MM / DD / YYYY
08 / 25 / 2017

Transaction ID : A2017-2156986

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McDonald, John, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Sales Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2017

Transaction ID : A2017-2157993

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McDonald, John, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Sales Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2017

Transaction ID : A2017-2157432

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 597 OF 1014
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McDonald, John, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Sales Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571523

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McDonald, John, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Sales Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534766

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McDonald, John, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Sales Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536517

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 598 OF 1014
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McDonald, John, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Sales Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857099

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McDonald, John, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Sales Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834046

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McDonald, John, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Sales Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877516

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 599 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McDonald, John, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
National Sales Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877953

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McIntyre, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534485

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McIntyre, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536616

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 600 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McIntyre, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2017

Transaction ID : A2017-2857289

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McIntyre, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834112

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McIntyre, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877366

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 601 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McIntyre, Robert, J.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877778

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McKernan, Francis, C.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

Transaction ID : A2017-2534694

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McKernan, Francis, C.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2017

Transaction ID : A2017-2536880

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

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)

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☒ 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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McKernan, Francis, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857026

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McKernan, Francis, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834244

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McKernan, Francis, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877443

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McKernan, Francis, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877880

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mejorado, Jose, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ops Airway MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888415

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mejorado, Jose, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ops Airway MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889038

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

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)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mejorado, Jose, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ops Airway MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156427

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mejorado, Jose, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ops Airway MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156996

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mejorado, Jose, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ops Airway MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2158003

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mejorado, Jose, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ops Airway MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157442

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mejorado, Jose, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ops Airway MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571533

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mejorado, Jose, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ops Airway MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534776

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mejorado, Jose, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ops Airway MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536527

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mejorado, Jose, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ops Airway MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857109

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mejorado, Jose, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ops Airway MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834056

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mejorado, Jose, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Ops Airway MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877526

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mejorado, Jose, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Ops Airway MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877963

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Meyers, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157472

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Meyers, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534806

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Meyers, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834085

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Meyers, Kevin, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877992

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Meyerson, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156719

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Meyerson, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156833

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Meyerson, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157840

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 610 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Meyerson, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157279

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Meyerson, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571372

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Meyerson, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534522

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 611 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Meyerson, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

11 / 03 / 2017

Transaction ID : A2017-2536641

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Meyerson, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857314

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Meyerson, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834165

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Meyerson, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877303

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Meyerson, Charles, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877803

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Miller, Artie, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR Ops MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534469

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

36.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 613 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miller, Artie, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR Ops MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536600

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Miller, Artie, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR Ops MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857274

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Miller, Artie, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR Ops MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834097

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 614 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miller, Artie, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR Ops MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877330

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Miller, Artie, C, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR Ops MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877763

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Miller, Jennifer, P, ,

Mailing Address 8200 Coral Sea Street NE

City
Mounds View

State
MN

Zip Code
55112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534737

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 615 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miller, Jennifer, P, ,

Mailing Address 8200 Coral Sea Street NE

City
Mounds View

State
MN

Zip Code
55112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536923

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Miller, Jennifer, P, ,

Mailing Address 8200 Coral Sea Street NE

City
Mounds View

State
MN

Zip Code
55112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857070

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Miller, Jennifer, P, ,

Mailing Address 8200 Coral Sea Street NE

City
Mounds View

State
MN

Zip Code
55112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834017

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

30.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 616 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miller, Jennifer, P, ,

Mailing Address 8200 Coral Sea Street NE

City

Mounds View

State

MN

Zip Code

55112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877487

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Miller, Jennifer, P, ,

Mailing Address 8200 Coral Sea Street NE

City

Mounds View

State

MN

Zip Code

55112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877924

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Miller, Michelle, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP/Chief Couns Empl Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888500

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 617 OF 1014

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miller, Michelle, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Empl Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889198

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Miller, Michelle, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Empl Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156515

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Miller, Michelle, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Empl Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157080

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 618 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miller, Michelle, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Chief Couns Empl Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	08	2017

Transaction ID : A2017-2157703

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Miller, Michelle, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Chief Couns Empl Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1520.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	22	2017

Transaction ID : A2017-2157526

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Miller, Michelle, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Chief Couns Empl Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	06	2017

Transaction ID : A2017-2571267

Amount of Each Receipt this Period

80.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 619 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miller, Michelle, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Empl Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534572

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Miller, Michelle, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Empl Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536684

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Miller, Michelle, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Empl Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857120

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

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 620 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miller, Michelle, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Empl Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834315

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Miller, Michelle, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Empl Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877609

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Miller, Michelle, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Chief Couns Empl Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878045

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 621 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mischka, Lindsey, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888467

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mischka, Lindsey, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889163

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mischka, Lindsey, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156480

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mischka, Lindsey, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

MM / DD / YYYY
08 / 25 / 2017

Transaction ID : A2017-2157046

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mischka, Lindsey, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2017

Transaction ID : A2017-2157669

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mischka, Lindsey, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2017

Transaction ID : A2017-2157492

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mischka, Lindsey, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571235

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mischka, Lindsey, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534826

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mischka, Lindsey, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536652

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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A. Mischka, Lindsey, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856923

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mischka, Lindsey, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834281

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mischka, Lindsey, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877575

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 625 OF 1014
(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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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mischka, Lindsey, L.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sales Representative II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2878011

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mitchiner, Michael, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

Transaction ID : A2017-2534845

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mitchiner, Michael, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2017

Transaction ID : A2017-2536761

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

45.00

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 626 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mitchiner, Michael, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857198

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mitchiner, Michael, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834392

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mitchiner, Michael, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877686

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mitchiner, Michael, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878122

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Monaghan, Shawn, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888799

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Monaghan, Shawn, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888947

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Monaghan, Shawn, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP BD/Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156600

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Monaghan, Shawn, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP BD/Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157164

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Monaghan, Shawn, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP BD/Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2158052

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 629 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Monaghan, Shawn, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157608

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Monaghan, Shawn, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571581

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Monaghan, Shawn, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534848

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 630 OF 1014
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536764

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Monaghan, Shawn, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857201

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Monaghan, Shawn, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834395

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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 631 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Monaghan, Shawn, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877689

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Monaghan, Shawn, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878125

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Morin, Kelly, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Strat Sourcing Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877984

Amount of Each Receipt this Period

8.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

108.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 632 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morrell, David, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888624

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Morrell, David, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889102

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Morrell, David, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156753

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 633 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morrell, David, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

MM / DD / YYYY
08 / 25 / 2017

Transaction ID : A2017-2156866

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Morrell, David, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2017

Transaction ID : A2017-2157873

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Morrell, David, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2017

Transaction ID : A2017-2157312

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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 634 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morrell, David, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571404

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Morrell, David, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534647

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Morrell, David, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536833

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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 635 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morrell, David, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856979

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Morrell, David, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834197

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Morrell, David, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877396

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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 636 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morrell, David, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877834

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Morrison, Matthew, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156503

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Morrison, Matthew, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157069

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.00

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 637 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morrison, Matthew, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157692

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Morrison, Matthew, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157515

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Morrison, Matthew, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571256

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 638 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morrison, Matthew, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 20 / 2017

Transaction ID : A2017-2534561

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Morrison, Matthew, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 03 / 2017

Transaction ID : A2017-2536673

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Morrison, Matthew, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 17 / 2017

Transaction ID : A2017-2856946

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

39.00

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 639 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morrison, Matthew, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834304

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Morrison, Matthew, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877598

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Morrison, Matthew, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878034

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 640 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Murphy, Sharon, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2017

Transaction ID : A2017-1888798

Amount of Each Receipt this Period

43.90

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Murphy, Sharon, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

659.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : A2017-1888946

Amount of Each Receipt this Period

44.78

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Murphy, Sharon, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

704.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Transaction ID : A2017-2156599

Amount of Each Receipt this Period

44.78

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

133.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Murphy, Sharon, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.94

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157163

Amount of Each Receipt this Period

44.78

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Murphy, Sharon, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

793.72

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2158051

Amount of Each Receipt this Period

44.78

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Murphy, Sharon, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

838.50

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157607

Amount of Each Receipt this Period

44.78

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

134.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 642 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Murphy, Sharon, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

883.28

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571580

Amount of Each Receipt this Period

44.78

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Murphy, Sharon, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

928.06

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534847

Amount of Each Receipt this Period

44.78

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Murphy, Sharon, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

972.84

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536763

Amount of Each Receipt this Period

44.78

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

134.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 643 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Murphy, Sharon, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1017.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857200

Amount of Each Receipt this Period

44.78

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Murphy, Sharon, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1062.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834394

Amount of Each Receipt this Period

44.78

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Murphy, Sharon, L, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1107.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877688

Amount of Each Receipt this Period

44.78

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

134.34

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Murphy, Sharon, L.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Compliance/Audit Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1151.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878124

Amount of Each Receipt this Period

44.78

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Musto, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888475

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Musto, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889171

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.78

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Musto, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156488

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Musto, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157054

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Musto, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157677

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 646 OF 1014

(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Musto, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157500

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Musto, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571243

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Musto, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534834

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 647 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Musto, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536660

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Musto, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856931

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Musto, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834289

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 648 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Musto, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877583

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Musto, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878019

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Noel, Therese, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Clinical Research Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534870

Amount of Each Receipt this Period

10.00

☐ Memo Item

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 649 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Noel, Therese, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536786

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Noel, Therese, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857223

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Noel, Therese, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834417

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 650 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Noel, Therese, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877711

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Noel, Therese, C, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Clinical Research Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878147

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'Donnell, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP RA DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1260.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888476

Amount of Each Receipt this Period

90.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 651 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'Donnell, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP RA DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889172

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'Donnell, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP RA DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156489

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'Donnell, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP RA DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1530.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157055

Amount of Each Receipt this Period

90.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

270.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 652 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'Donnell, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP RA DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1620.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157678

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'Donnell, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP RA DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1710.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157501

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'Donnell, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP RA DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571244

Amount of Each Receipt this Period

90.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

270.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 653 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'Donnell, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP RA DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534835

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'Donnell, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP RA DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1980.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536661

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'Donnell, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP RA DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2070.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856932

Amount of Each Receipt this Period

90.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

270.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 654 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'Donnell, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP RA DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2160.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834290

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'Donnell, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP RA DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877584

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'Donnell, Mark, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP RA DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2340.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878020

Amount of Each Receipt this Period

90.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

270.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Oborny, Lewis, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Logistics Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534824

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Oborny, Lewis, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Logistics Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536650

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Oborny, Lewis, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Logistics Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856921

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 656 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Oborny, Lewis, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Logistics Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834279

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Oborny, Lewis, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Logistics Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877573

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Oborny, Lewis, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Logistics Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878009

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

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 657 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Oei, Gia, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888682

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Oei, Gia, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888683

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Oei, Gia, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Global Comm & Mkt Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156351

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 658 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Orttel, Rebecca, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888555

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Orttel, Rebecca, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889309

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Orttel, Rebecca, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156685

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 659 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Orttel, Rebecca, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156800

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Orttel, Rebecca, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157807

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Orttel, Rebecca, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157246

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 660 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Orttel, Rebecca, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571339

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Orttel, Rebecca, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534477

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Orttel, Rebecca, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536608

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 661 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Orttel, Rebecca, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Legal Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857281

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Orttel, Rebecca, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Legal Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834104

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Orttel, Rebecca, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Legal Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877358

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 662 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Orttel, Rebecca, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877770

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Overvig, Arlen, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888546

Amount of Each Receipt this Period

52.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Overvig, Arlen, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889300

Amount of Each Receipt this Period

52.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

154.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Overvig, Arlen, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156676

Amount of Each Receipt this Period

52.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Overvig, Arlen, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

884.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156791

Amount of Each Receipt this Period

52.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Overvig, Arlen, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

936.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157798

Amount of Each Receipt this Period

52.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

156.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 664 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Overvig, Arlen, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

988.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157237

Amount of Each Receipt this Period

52.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Overvig, Arlen, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571330

Amount of Each Receipt this Period

52.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Overvig, Arlen, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1092.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534468

Amount of Each Receipt this Period

52.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

156.00

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 665 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Overvig, Arlen, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1144.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536599

Amount of Each Receipt this Period

52.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Overvig, Arlen, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1196.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857273

Amount of Each Receipt this Period

52.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Overvig, Arlen, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1248.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834159

Amount of Each Receipt this Period

52.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

156.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Overvig, Arlen, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877329

Amount of Each Receipt this Period

52.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Overvig, Arlen, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Firmware Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1352.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877762

Amount of Each Receipt this Period

52.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Parkhill, Karen, L, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
EVP/Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 18 / 2017

Transaction ID : A2017-3083785

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5104.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 667 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Paul, Jacob, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP APAC RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

MM / DD / YYYY
07 / 14 / 2017

Transaction ID : A2017-1888697

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Paul, Jacob, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP APAC RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

MM / DD / YYYY
07 / 28 / 2017

Transaction ID : A2017-1888878

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Paul, Jacob, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP APAC RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

416.00

Date of Receipt

MM / DD / YYYY
08 / 11 / 2017

Transaction ID : A2017-2156366

Amount of Each Receipt this Period

26.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 668 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Paul, Jacob, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP APAC RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156936

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Paul, Jacob, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP APAC RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157943

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Paul, Jacob, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP APAC RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

494.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157382

Amount of Each Receipt this Period

26.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.00

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 669 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Paul, Jacob, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP APAC RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571474

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Paul, Jacob, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP APAC RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534717

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Paul, Jacob, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP APAC RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

572.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536903

Amount of Each Receipt this Period

26.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 670 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Paul, Jacob, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP APAC RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2017

Transaction ID : A2017-2857049

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Paul, Jacob, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP APAC RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834267

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Paul, Jacob, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP APAC RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877466

Amount of Each Receipt this Period

26.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

78.00

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 671 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Paul, Jacob, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP APAC RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

676.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877903

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pendency, Luann, M, Ms.,

Mailing Address 710 Medtronic Pkwy

City
MinneapolisState
MNZip Code
55432-5603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/Chief Quality/RA Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888470

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pendency, Luann, M, Ms.,

Mailing Address 710 Medtronic Pkwy

City
MinneapolisState
MNZip Code
55432-5603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/Chief Quality/RA Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2295.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889166

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

176.00

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 672 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pendy, Luann, M, Ms.,

Mailing Address 710 Medtronic Pkwy

City
MinneapolisState
MNZip Code
55432-5603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/Chief Quality/RA Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156483

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pendy, Luann, M, Ms.,

Mailing Address 710 Medtronic Pkwy

City
MinneapolisState
MNZip Code
55432-5603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/Chief Quality/RA Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2445.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157049

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pendy, Luann, M, Ms.,

Mailing Address 710 Medtronic Pkwy

City
MinneapolisState
MNZip Code
55432-5603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/Chief Quality/RA Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157672

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

225.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 673 OF 1014

(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pendy, Luann, M, Ms.,

Mailing Address 710 Medtronic Pkwy

City
MinneapolisState
MNZip Code
55432-5603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/Chief Quality/RA Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2595.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Transaction ID : A2017-2157495

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pendy, Luann, M, Ms.,

Mailing Address 710 Medtronic Pkwy

City
MinneapolisState
MNZip Code
55432-5603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/Chief Quality/RA Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2670.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

Transaction ID : A2017-2571238

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pendy, Luann, M, Ms.,

Mailing Address 710 Medtronic Pkwy

City
MinneapolisState
MNZip Code
55432-5603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/Chief Quality/RA Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2745.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534829

Amount of Each Receipt this Period

75.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

225.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 674 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pendy, Luann, M, Ms.,

Mailing Address 710 Medtronic Pkwy

City
MinneapolisState
MNZip Code
55432-5603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

SVP/Chief Quality/RA Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2820.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : A2017-2536655

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pendy, Luann, M, Ms.,

Mailing Address 710 Medtronic Pkwy

City
MinneapolisState
MNZip Code
55432-5603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

SVP/Chief Quality/RA Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2895.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2017

Transaction ID : A2017-2856926

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pendy, Luann, M, Ms.,

Mailing Address 710 Medtronic Pkwy

City
MinneapolisState
MNZip Code
55432-5603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

SVP/Chief Quality/RA Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2970.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2017

Transaction ID : A2017-2834284

Amount of Each Receipt this Period

75.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

225.00

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 675 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pendy, Luann, M, Ms.,

Mailing Address 710 Medtronic Pkwy

City
Minneapolis

State
MN

Zip Code
55432-5603

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/Chief Quality/RA Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3045.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877578

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pendy, Luann, M, Ms.,

Mailing Address 710 Medtronic Pkwy

City
Minneapolis

State
MN

Zip Code
55432-5603

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/Chief Quality/RA Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3120.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878014

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Peterson, Gordon, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888685

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 676 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Peterson, Gordon, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888866

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Peterson, Gordon, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156354

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Peterson, Gordon, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156924

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

45.00

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 677 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Peterson, Gordon, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157931

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Peterson, Gordon, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157370

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Peterson, Gordon, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571462

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

45.00

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 678 OF 1014

(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Peterson, Gordon, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534705

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Peterson, Gordon, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536891

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Peterson, Gordon, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857037

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

45.00

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 679 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Peterson, Gordon, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834255

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Peterson, Gordon, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877454

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Peterson, Gordon, A, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877891

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 680 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pfeifer, Neal, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888516

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pfeifer, Neal, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889214

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pfeifer, Neal, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156531

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 681 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pfeifer, Neal, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157096

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pfeifer, Neal, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157719

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pfeifer, Neal, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157541

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

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 682 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pfeifer, Neal, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571282

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pfeifer, Neal, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534587

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pfeifer, Neal, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536699

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

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 683 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pfeifer, Neal, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857135

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pfeifer, Neal, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834330

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pfeifer, Neal, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877624

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 684 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pfeifer, Neal, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878060

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Phelan, John, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep IV - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534768

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Phelan, John, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep IV - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536519

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

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 685 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Phelan, John, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep IV - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857101

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Phelan, John, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep IV - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834048

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Phelan, John, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep IV - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877518

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 686 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Phelan, John, E.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep IV - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877955

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pierson, James, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534747

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pierson, James, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536498

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 687 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pierson, James, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2017

Transaction ID : A2017-2857080

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pierson, James, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834027

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pierson, James, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877497

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

30.00

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 688 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pierson, James, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877934

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pisanelli, Kristina, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP GA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2688.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888451

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pisanelli, Kristina, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP GA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2880.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889147

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

394.00

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 689 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pisanelli, Kristina, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP GA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156464

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pisanelli, Kristina, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP GA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3264.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157031

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pisanelli, Kristina, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP GA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3456.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157654

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 690 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pisanelli, Kristina, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP GA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3648.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157477

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pisanelli, Kristina, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP GA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571220

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pisanelli, Kristina, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP GA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4032.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534811

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 691 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pisanelli, Kristina, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP GA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : A2017-2536560

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pisanelli, Kristina, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP GA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4416.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2017

Transaction ID : A2017-2856908

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pisanelli, Kristina, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP GA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4608.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2017

Transaction ID : A2017-2834089

Amount of Each Receipt this Period

192.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

576.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 692 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pisanelli, Kristina, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP GA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877560

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pisanelli, Kristina, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP GA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877996

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Poley, David, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Physician Rel Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	11	/	2017

Transaction ID : A2017-2156754

Amount of Each Receipt this Period

13.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

397.00

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 693 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Poley, David, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Physician Rel Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156867

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Poley, David, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Physician Rel Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157874

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Poley, David, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Physician Rel Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157313

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 694 OF 1014
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Poley, David, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Physician Rel Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571405

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Poley, David, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Physician Rel Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534648

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Poley, David, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Physician Rel Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536834

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

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 695 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Poley, David, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Physician Rel Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856980

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Poley, David, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Physician Rel Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834198

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Poley, David, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Physician Rel Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877397

Amount of Each Receipt this Period

13.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 696 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Poley, David, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Physician Rel Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877835

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pollock, John, G, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534769

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pollock, John, G, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536520

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

33.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 697 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pollock, John, G, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857102

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pollock, John, G, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834049

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pollock, John, G, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877519

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 698 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pollock, John, G, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877956

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Presty, Dominic, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888644

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Presty, Dominic, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889122

Amount of Each Receipt this Period

50.00

☐ Memo Item

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)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Presty, Dominic, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156313

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Presty, Dominic, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156885

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Presty, Dominic, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157892

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 700 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Presty, Dominic, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157331

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Presty, Dominic, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571423

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Presty, Dominic, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534666

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Presty, Dominic, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536852

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Presty, Dominic, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856998

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Presty, Dominic, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834216

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 702 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Presty, Dominic, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877415

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Presty, Dominic, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877853

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Qualls, Kendall, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888438

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Qualls, Kendall, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889061

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Qualls, Kendall, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156450

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Qualls, Kendall, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157018

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

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 704 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Qualls, Kendall, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2158025

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Qualls, Kendall, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157464

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Qualls, Kendall, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

10 / 06 / 2017

Transaction ID : A2017-2571208

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 705 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Qualls, Kendall, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534798

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Quandt, Larry, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571227

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Quandt, Larry, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534818

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

130.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 706 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Quandt, Larry, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536567

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Quandt, Larry, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856915

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Quandt, Larry, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834096

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 707 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Quandt, Larry, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877567

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Quandt, Larry, H, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878003

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Quinn, Lisa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888468

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

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 708 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Quinn, Lisa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889164

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Quinn, Lisa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156481

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Quinn, Lisa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157047

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 709 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Quinn, Lisa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157670

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Quinn, Lisa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157493

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Quinn, Lisa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 06 / 2017

Transaction ID : A2017-2571236

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 710 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Quinn, Lisa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534827

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Quinn, Lisa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536653

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Quinn, Lisa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856924

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 711 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Quinn, Lisa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834282

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Quinn, Lisa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877576

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Quinn, Lisa, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878012

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 712 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Quintus, Sheila, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Asst Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888802

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Quintus, Sheila, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Asst Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888950

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Quintus, Sheila, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Asst Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156603

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 713 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Quintus, Sheila, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Asst Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157167

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Quintus, Sheila, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Asst Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2158055

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Quintus, Sheila, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Asst Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

760.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157611

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

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 714 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Quintus, Sheila, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Asst Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571584

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Quintus, Sheila, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Asst Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534851

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Quintus, Sheila, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Asst Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536767

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 715 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Quintus, Sheila, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Asst Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2017

Transaction ID : A2017-2857204

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Quintus, Sheila, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Asst Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834398

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Quintus, Sheila, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Asst Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877692

Amount of Each Receipt this Period

40.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

120.00

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 716 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Quintus, Sheila, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Asst Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878128

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rakestraw, Adam, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Interventional Therapy Cons II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534506

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rakestraw, Adam, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Interventional Therapy Cons II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536573

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 717 OF 1014
(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)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rakestraw, Adam, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Interventional Therapy Cons II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2017

Transaction ID : A2017-2857247

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rakestraw, Adam, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Interventional Therapy Cons II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834133

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rakestraw, Adam, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Interventional Therapy Cons II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877332

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 718 OF 1014

(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rakestraw, Adam, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Interventional Therapy Cons II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877736

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reid, Jay, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Training/Education Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888706

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reid, Jay, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Training/Education Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888888

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

60.00

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 719 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reid, Jay, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Training/Education Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156376

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reid, Jay, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Training/Education Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156946

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reid, Jay, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Training/Education Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157953

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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 720 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reid, Jay, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Training/Education Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157392

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reid, Jay, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Training/Education Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571483

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reid, Jay, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Training/Education Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534726

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 721 OF 1014
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reid, Jay, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Training/Education Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536912

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reid, Jay, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Training/Education Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857059

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reid, Jay, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Training/Education Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834006

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 722 OF 1014
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reid, Jay, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Training/Education Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877476

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reid, Jay, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Training/Education Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877913

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reimann, Thomas, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534881

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 723 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reimann, Thomas, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 03 / 2017

Transaction ID : A2017-2536797

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reimann, Thomas, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857234

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reimann, Thomas, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2833991

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 724 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reimann, Thomas, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877722

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reimann, Thomas, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878158

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reitmeier, Amaza, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Med Ed/Field Dev RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534454

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

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 725 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reitmeier, Amaza, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Med Ed/Field Dev RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536585

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reitmeier, Amaza, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Med Ed/Field Dev RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857259

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reitmeier, Amaza, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Med Ed/Field Dev RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834145

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

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 726 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reitmeier, Amaza, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Med Ed/Field Dev RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877344

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reitmeier, Amaza, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Med Ed/Field Dev RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877748

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reitz-Bouren, Pamela, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534602

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 727 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reitz-Bouren, Pamela, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536714

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reitz-Bouren, Pamela, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857150

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reitz-Bouren, Pamela, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834344

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

30.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 728 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reitz-Bouren, Pamela, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877638

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reitz-Bouren, Pamela, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2878074

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rich, Christina, F, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Ethics/Compl Dpty

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2017

Transaction ID : A2017-1888599

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

70.00

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 729 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rich, Christina, F, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ethics/Compl Dpty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889076

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rich, Christina, F, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ethics/Compl Dpty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156728

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rich, Christina, F, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ethics/Compl Dpty

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156842

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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 730 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rich, Christina, F, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ethics/Compl Dpty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157849

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rich, Christina, F, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ethics/Compl Dpty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157288

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rich, Christina, F, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ethics/Compl Dpty

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571381

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 731 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rich, Christina, F, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Ethics/Compl Dpty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534531

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rich, Christina, F, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Ethics/Compl Dpty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536810

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rich, Christina, F, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Ethics/Compl Dpty

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856955

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

150.00

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 732 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rich, Christina, F, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ethics/Compl Dpty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834174

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rich, Christina, F, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ethics/Compl Dpty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877374

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rich, Christina, F, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ethics/Compl Dpty

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877812

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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 733 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rissberger, Thomas, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep I-Med Supp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888825

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rissberger, Thomas, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep I-Med Supp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889250

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rissberger, Thomas, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep I-Med Supp

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156626

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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 734 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ritz, James, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888728

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ritz, James, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889009

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ritz, James, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156398

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 735 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ritz, James, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2017

Transaction ID : A2017-2156968

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ritz, James, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2017

Transaction ID : A2017-2157975

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ritz, James, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2017

Transaction ID : A2017-2157414

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ritz, James, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571505

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ritz, James, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534748

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ritz, James, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536499

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 737 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ritz, James, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857081

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ritz, James, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834028

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ritz, James, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877498

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

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 738 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ritz, James, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877935

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Roberts, Dale, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep Interventional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534547

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Roberts, Dale, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep Interventional

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536825

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 739 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Roberts, Dale, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep Interventional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856971

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Roberts, Dale, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep Interventional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834189

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Roberts, David, H, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP AMER CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888632

Amount of Each Receipt this Period

135.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

155.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 740 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Roberts, David, H, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2025.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889110

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Roberts, David, H, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2160.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156760

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Roberts, David, H, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156873

Amount of Each Receipt this Period

135.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

405.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Roberts, David, H, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2430.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157880

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Roberts, David, H, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2565.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157319

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Roberts, David, H, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571411

Amount of Each Receipt this Period

135.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

405.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 742 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Roberts, David, H, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2835.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534654

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Roberts, David, H, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2970.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536839

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Roberts, David, H, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3105.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856985

Amount of Each Receipt this Period

135.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

405.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 743 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Roberts, David, H, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834203

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Roberts, David, H, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3375.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877402

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Roberts, David, H, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP AMER CVG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3510.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877840

Amount of Each Receipt this Period

135.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

405.00

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 744 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rodgers, Erin, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Internal Comm Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888668

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rodgers, Erin, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Internal Comm Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888849

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodgers, Erin, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Internal Comm Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156337

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 745 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rodgers, Erin, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Internal Comm Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

MM / DD / YYYY
08 / 25 / 2017

Transaction ID : A2017-2156908

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rodgers, Erin, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Internal Comm Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2017

Transaction ID : A2017-2157915

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodgers, Erin, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Internal Comm Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2017

Transaction ID : A2017-2157354

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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 746 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rodgers, Erin, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Internal Comm Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571446

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rodgers, Erin, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Internal Comm Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534689

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodgers, Erin, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Internal Comm Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536875

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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 747 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rodgers, Erin, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Internal Comm Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857021

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rodgers, Erin, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Internal Comm Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834239

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodgers, Erin, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Internal Comm Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877438

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 748 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rodgers, Erin, E, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Internal Comm Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877875

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rodriguez, Adam, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat/CM Amer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888521

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodriguez, Adam, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat/CM Amer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889275

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 749 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rodriguez, Adam, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat/CM Amer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156651

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rodriguez, Adam, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat/CM Amer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156766

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodriguez, Adam, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat/CM Amer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157773

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

225.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 750 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rodriguez, Adam, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP BD/Strat/CM Amer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Transaction ID : A2017-2157212

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rodriguez, Adam, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP BD/Strat/CM Amer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

Transaction ID : A2017-2571305

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodriguez, Adam, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP BD/Strat/CM Amer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534507

Amount of Each Receipt this Period

75.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

225.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 751 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rodriguez, Adam, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP BD/Strat/CM Amer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2017

Transaction ID : A2017-2536574

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rodriguez, Adam, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP BD/Strat/CM Amer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2017

Transaction ID : A2017-2857248

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodriguez, Adam, J, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP BD/Strat/CM Amer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834134

Amount of Each Receipt this Period

75.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

225.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rodriguez, Adam, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat/CM Amer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877333

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rodriguez, Adam, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP BD/Strat/CM Amer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877737

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodriguez, Angel, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Technical Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888539

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

175.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 753 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rodriguez, Angel, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Technical Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : A2017-1889293

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rodriguez, Angel, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Technical Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Transaction ID : A2017-2156669

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodriguez, Angel, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Technical Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2017

Transaction ID : A2017-2156784

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 754 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rodriguez, Angel, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Technical Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	08	2017

Transaction ID : A2017-2157791

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rodriguez, Angel, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Technical Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	22	2017

Transaction ID : A2017-2157230

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodriguez, Angel, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Technical Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	06	2017

Transaction ID : A2017-2571323

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

75.00

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 755 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rodriguez, Angel, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Technical Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534461

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rodriguez, Angel, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Technical Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536592

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodriguez, Angel, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Technical Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857266

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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 756 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rodriguez, Angel, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Technical Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834152

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rodriguez, Angel, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Technical Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877351

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rodriguez, Angel, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Technical Services Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877755

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 757 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rothman, Martin, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Med Affairs Coro/RDN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888481

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rothman, Martin, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Med Affairs Coro/RDN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889178

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rothman, Martin, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Med Affairs Coro/RDN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156495

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 758 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rothman, Martin, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Med Affairs Coro/RDN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157061

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rothman, Martin, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Med Affairs Coro/RDN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157684

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rothman, Martin, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Med Affairs Coro/RDN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157507

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

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 759 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rothman, Martin, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Med Affairs Coro/RDN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571249

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rothman, Martin, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Med Affairs Coro/RDN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534553

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rothman, Martin, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Med Affairs Coro/RDN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536666

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 760 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rothman, Martin, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Med Affairs Coro/RDN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856938

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rothman, Martin, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Med Affairs Coro/RDN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834296

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rothman, Martin, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Med Affairs Coro/RDN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877590

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 761 OF 1014

(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rothman, Martin, , Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Med Affairs Coro/RDN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2878026

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rottunda, Sara, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr IT Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

Transaction ID : A2017-2534838

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rottunda, Sara, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr IT Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2017

Transaction ID : A2017-2536754

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

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 762 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rottunda, Sara, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857191

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rottunda, Sara, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834385

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rottunda, Sara, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877679

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

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 763 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rottunda, Sara, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878115

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rustad, Dean, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Fin CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888636

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rustad, Dean, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Fin CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889114

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 764 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rustad, Dean, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Fin CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156305

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rustad, Dean, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Fin CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156877

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rustad, Dean, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Fin CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157884

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

240.00

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 765 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rustad, Dean, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Fin CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157323

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rustad, Dean, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Fin CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571415

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rustad, Dean, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Fin CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534658

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rustad, Dean, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Fin CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536844

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rustad, Dean, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Fin CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856990

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rustad, Dean, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Fin CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834208

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 767 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rustad, Dean, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Fin CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877407

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rustad, Dean, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Fin CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877845

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Salmon, Sean, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President CSH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2017

Transaction ID : A2017-1888797

Amount of Each Receipt this Period

19.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

179.00

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 768 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Salmon, Sean, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President CSH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888945

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Salmon, Sean, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President CSH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156598

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Salmon, Sean, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President CSH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157162

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

57.00

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 769 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Salmon, Sean, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President CSH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2158050

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Salmon, Sean, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President CSH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157606

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Salmon, Sean, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President CSH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571579

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.00

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 770 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Salmon, Sean, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President CSH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534846

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Salmon, Sean, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President CSH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536762

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Salmon, Sean, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President CSH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

437.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857199

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

57.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 771 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Salmon, Sean, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President CSH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834393

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Salmon, Sean, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President CSH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877687

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Salmon, Sean, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President CSH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878123

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 772 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schaber, Daniel, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Clin Research HF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888620

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schaber, Daniel, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Clin Research HF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1215.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889098

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schaber, Daniel, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Clin Research HF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156749

Amount of Each Receipt this Period

135.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

405.00

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 773 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schaber, Daniel, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Clin Research HF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1485.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156863

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schaber, Daniel, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Clin Research HF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1620.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157870

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schaber, Daniel, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Clin Research HF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1755.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157309

Amount of Each Receipt this Period

135.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

405.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 774 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schaber, Daniel, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Clin Research HF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 06 / 2017

Transaction ID : A2017-2571401

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schaber, Daniel, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Clin Research HF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2025.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 20 / 2017

Transaction ID : A2017-2534644

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schaber, Daniel, E, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Clin Research HF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2160.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 03 / 2017

Transaction ID : A2017-2536830

Amount of Each Receipt this Period

135.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

405.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 775 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schaber, Daniel, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Clin Research HF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2295.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856976

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schaber, Daniel, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Clin Research HF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2430.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834194

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schaber, Daniel, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Clin Research HF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2565.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877393

Amount of Each Receipt this Period

135.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

405.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 776 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schaber, Daniel, E.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Clin Research HF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877831

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Scherer, Rachael, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888762

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Scherer, Rachael, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888909

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

335.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 777 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Scherer, Rachael, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156562

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Scherer, Rachael, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157127

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Scherer, Rachael, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157750

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 778 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Scherer, Rachael, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157572

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Scherer, Rachael, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571546

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Scherer, Rachael, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534617

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 779 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Scherer, Rachael, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536729

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Scherer, Rachael, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857165

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Scherer, Rachael, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834359

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 780 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Scherer, Rachael, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877653

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Scherer, Rachael, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Strat CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878089

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schmidt, Theodore, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888822

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 781 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schmidt, Theodore, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889247

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schmidt, Theodore, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156623

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schmidt, Theodore, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157186

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 782 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schmidt, Theodore, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2158073

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schmidt, Theodore, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157629

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schmidt, Theodore, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571602

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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 783 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schmidt, Theodore, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534869

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schmidt, Theodore, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536785

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schmidt, Theodore, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857222

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 784 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schmidt, Theodore, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834416

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schmidt, Theodore, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877710

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schmidt, Theodore, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878146

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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 785 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schneeberger, Michael, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR APAC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157076

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schneeberger, Michael, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR APAC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157699

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schneeberger, Michael, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR APAC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157522

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

36.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 786 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schneeberger, Michael, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP HR APAC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

Transaction ID : A2017-2571263

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schneeberger, Michael, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP HR APAC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534568

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schneeberger, Michael, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP HR APAC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : A2017-2536680

Amount of Each Receipt this Period

12.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

36.00

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 787 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schneeberger, Michael, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR APAC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857116

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schneeberger, Michael, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR APAC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834311

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schneeberger, Michael, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP HR APAC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877605

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

36.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 788 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schneeberger, Michael, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP HR APAC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878041

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schwiebert, Jennifer, W, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Value Stream Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888900

Amount of Each Receipt this Period

13.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schwiebert, Jennifer, W, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Value Stream Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156388

Amount of Each Receipt this Period

13.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 789 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schwiebert, Jennifer, W, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Value Stream Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.82

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156958

Amount of Each Receipt this Period

13.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schwiebert, Jennifer, W, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Value Stream Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.28

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157965

Amount of Each Receipt this Period

13.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schwiebert, Jennifer, W, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Value Stream Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.74

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157404

Amount of Each Receipt this Period

13.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.38

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 790 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schwiebert, Jennifer, W, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Value Stream Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571495

Amount of Each Receipt this Period

13.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schwiebert, Jennifer, W, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Value Stream Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.66

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534738

Amount of Each Receipt this Period

13.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schwiebert, Jennifer, W, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Value Stream Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

296.12

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536924

Amount of Each Receipt this Period

13.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

40.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 791 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schwiebert, Jennifer, W, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Value Stream Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.58

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857071

Amount of Each Receipt this Period

13.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schwiebert, Jennifer, W, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Value Stream Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.04

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834018

Amount of Each Receipt this Period

13.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schwiebert, Jennifer, W, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Value Stream Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877488

Amount of Each Receipt this Period

13.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.38

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 792 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schwiebert, Jennifer, W, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Value Stream Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877925

Amount of Each Receipt this Period

13.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schwister, Steven, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888813

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schwister, Steven, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889238

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

43.46

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 793 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schwister, Steven, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Transaction ID : A2017-2156614

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schwister, Steven, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2017

Transaction ID : A2017-2157177

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schwister, Steven, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2017

Transaction ID : A2017-2158065

Amount of Each Receipt this Period

15.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

45.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schwister, Steven, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157621

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schwister, Steven, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571594

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schwister, Steven, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534861

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 795 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schwister, Steven, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : A2017-2536777

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schwister, Steven, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2017

Transaction ID : A2017-2857214

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schwister, Steven, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2017

Transaction ID : A2017-2834408

Amount of Each Receipt this Period

15.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schwister, Steven, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877702

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schwister, Steven, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878138

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Semedo, Anthony, B, Mr.,

Mailing Address 3850 Brickway Blvd

City
Santa Rosa

State
CA

Zip Code
95403-8223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Japan

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888840

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

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 797 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Semedo, Anthony, B, Mr.,

Mailing Address 3850 Brickway Blvd

City
Santa Rosa

State
CA

Zip Code
95403-8223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Japan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889265

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Semedo, Anthony, B, Mr.,

Mailing Address 3850 Brickway Blvd

City
Santa Rosa

State
CA

Zip Code
95403-8223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Japan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156641

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Semedo, Anthony, B, Mr.,

Mailing Address 3850 Brickway Blvd

City
Santa Rosa

State
CA

Zip Code
95403-8223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Japan

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157202

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 798 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Semedo, Anthony, B, Mr.,

Mailing Address 3850 Brickway Blvd

City
Santa Rosa

State
CA

Zip Code
95403-8223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Japan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2158089

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Semedo, Anthony, B, Mr.,

Mailing Address 3850 Brickway Blvd

City
Santa Rosa

State
CA

Zip Code
95403-8223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Japan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157645

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Semedo, Anthony, B, Mr.,

Mailing Address 3850 Brickway Blvd

City
Santa Rosa

State
CA

Zip Code
95403-8223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Japan

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571618

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

300.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 799 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Semedo, Anthony, B, Mr.,

Mailing Address 3850 Brickway Blvd

City
Santa RosaState
CAZip Code
95403-8223FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Japan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534885

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Semedo, Anthony, B, Mr.,

Mailing Address 3850 Brickway Blvd

City
Santa RosaState
CAZip Code
95403-8223FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Japan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : A2017-2536801

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Semedo, Anthony, B, Mr.,

Mailing Address 3850 Brickway Blvd

City
Santa RosaState
CAZip Code
95403-8223FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Japan

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2017

Transaction ID : A2017-2857238

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

300.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 800 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Semedo, Anthony, B, Mr.,

Mailing Address 3850 Brickway Blvd

City
Santa Rosa

State
CA

Zip Code
95403-8223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Japan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2833995

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Semedo, Anthony, B, Mr.,

Mailing Address 3850 Brickway Blvd

City
Santa Rosa

State
CA

Zip Code
95403-8223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Japan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877726

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Semedo, Anthony, B, Mr.,

Mailing Address 3850 Brickway Blvd

City
Santa Rosa

State
CA

Zip Code
95403-8223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Japan

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878162

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 801 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Seppi, Gina, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888684

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Seppi, Gina, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-188865

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Seppi, Gina, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156353

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 802 OF 1014

(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Seppi, Gina, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M	D D	Y Y Y Y
08	25	2017

Transaction ID : A2017-2156923

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Seppi, Gina, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M	D D	Y Y Y Y
09	08	2017

Transaction ID : A2017-2157930

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Seppi, Gina, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M	D D	Y Y Y Y
09	22	2017

Transaction ID : A2017-2157369

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

90.00

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 803 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Seppi, Gina, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571461

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Seppi, Gina, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534704

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Seppi, Gina, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536890

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 804 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Seppi, Gina, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2017

Transaction ID : A2017-2857036

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Seppi, Gina, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2017

Transaction ID : A2017-2834254

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Seppi, Gina, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2017

Transaction ID : A2017-2877453

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 805 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Seppi, Gina, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877890

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Shankar, Balakrishnan, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Software Dev CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

Transaction ID : A2017-2534472

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Shankar, Balakrishnan, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Software Dev CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2017

Transaction ID : A2017-2536603

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

50.00

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 806 OF 1014

(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Shankar, Balakrishnan, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Software Dev CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857277

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Shankar, Balakrishnan, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Software Dev CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834100

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Shankar, Balakrishnan, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Software Dev CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877354

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 807 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Shankar, Balakrishnan, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Software Dev CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877766

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Shapiro, Jeffrey, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534733

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Shapiro, Jeffrey, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536919

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 808 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Shapiro, Jeffrey, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857066

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Shapiro, Jeffrey, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834013

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Shapiro, Jeffrey, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877483

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 809 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Shapiro, Jeffrey, G, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877920

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sheldon, Ann, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Supplier Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888545

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sheldon, Ann, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Supplier Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889299

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 810 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sheldon, Ann, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Supplier Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Transaction ID : A2017-2156675

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sheldon, Ann, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Supplier Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2017

Transaction ID : A2017-2156790

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sheldon, Ann, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Supplier Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2017

Transaction ID : A2017-2157797

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

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 811 OF 1014

☒ 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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sheldon, Ann, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Supplier Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157236

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sheldon, Ann, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Supplier Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571329

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sheldon, Ann, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Supplier Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534467

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 812 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sheldon, Ann, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Supplier Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536598

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sheldon, Ann, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Supplier Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857272

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sheldon, Ann, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Supplier Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834158

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 813 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sheldon, Ann, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Supplier Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877328

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sheldon, Ann, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Supplier Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877761

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Sheth, Vipul, B, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Corp Qual

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888843

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

100.00

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 814 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sheth, Vipul, B, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Corp Qual

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889268

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sheth, Vipul, B, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Corp Qual

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156644

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Sheth, Vipul, B, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Corp Qual

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157205

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 815 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sheth, Vipul, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Qual

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2158092

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sheth, Vipul, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Qual

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157648

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sheth, Vipul, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Qual

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571621

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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 816 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sheth, Vipul, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Qual

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534888

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sheth, Vipul, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Qual

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536804

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Sheth, Vipul, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Qual

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857241

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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 817 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sheth, Vipul, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Qual

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2833998

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sheth, Vipul, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Qual

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877729

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Sheth, Vipul, B, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Corp Qual

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878165

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 818 OF 1014
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Shewchuk, Tara, R, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Ethics/Compl RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534867

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Shewchuk, Tara, R, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Ethics/Compl RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : A2017-2536783

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Shewchuk, Tara, R, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Ethics/Compl RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2017

Transaction ID : A2017-2857220

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 819 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Shewchuk, Tara, R, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Ethics/Compl RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2017

Transaction ID : A2017-2834414

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Shewchuk, Tara, R, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Ethics/Compl RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2017

Transaction ID : A2017-2877708

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Shewchuk, Tara, R, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Ethics/Compl RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2017

Transaction ID : A2017-2878144

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

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 820 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Smeltzer, John, C, Mr., III

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534771

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Smeltzer, John, C, Mr., III

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536522

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Smeltzer, John, C, Mr., III

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857104

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 821 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Smeltzer, John, C, Mr., III

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834051

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Smeltzer, John, C, Mr., III

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877521

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Smeltzer, John, C, Mr., III

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Sales Rep Aortic

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877958

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 822 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sneed, Monique, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr HR Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534583

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sneed, Monique, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr HR Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536695

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sneed, Monique, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr HR Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857131

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

30.00

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 823 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sneed, Monique, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834326

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sneed, Monique, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877620

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sneed, Monique, , Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr HR Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878056

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 824 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Snyder, Kimberly, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
IT Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534807

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Snyder, Kimberly, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
IT Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536556

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Snyder, Kimberly, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
IT Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856905

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 825 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Snyder, Kimberly, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
IT Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834086

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Snyder, Kimberly, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
IT Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877557

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Snyder, Kimberly, B, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
IT Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877993

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

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 826 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Song, Haiyang, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534664

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Song, Haiyang, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536850

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Song, Haiyang, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856996

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 827 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Song, Haiyang, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834214

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Song, Haiyang, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877413

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Song, Haiyang, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877851

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 828 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Southwick, James, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Gbl Dpty Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2017

Transaction ID : A2017-1888700

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Southwick, James, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Gbl Dpty Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : A2017-1888881

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Southwick, James, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/Gbl Dpty Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Transaction ID : A2017-2156369

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

300.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 829 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Southwick, James, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Gbl Dpty Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156939

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Southwick, James, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Gbl Dpty Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157946

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Southwick, James, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Gbl Dpty Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157385

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

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 830 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Southwick, James, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Gbl Dpty Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571477

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Southwick, James, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Gbl Dpty Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534720

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Southwick, James, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Gbl Dpty Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536906

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 831 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Southwick, James, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Gbl Dpty Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857052

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Southwick, James, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Gbl Dpty Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834270

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Southwick, James, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Gbl Dpty Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877469

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 832 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Southwick, James, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/Gbl Dpty Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877906

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Steinborn, Philip, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP QA/RA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1260.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888761

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Steinborn, Philip, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP QA/RA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888908

Amount of Each Receipt this Period

90.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

280.00

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 833 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Steinborn, Philip, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP QA/RA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156561

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Steinborn, Philip, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP QA/RA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1530.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157126

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Steinborn, Philip, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP QA/RA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1620.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157749

Amount of Each Receipt this Period

90.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

270.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 834 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Steinborn, Philip, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP QA/RA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1710.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Transaction ID : A2017-2157571

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Steinborn, Philip, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP QA/RA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

Transaction ID : A2017-2571545

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Steinborn, Philip, M, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP QA/RA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534616

Amount of Each Receipt this Period

90.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

270.00

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 835 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Steinborn, Philip, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP QA/RA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1980.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536728

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Steinborn, Philip, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP QA/RA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2070.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857164

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Steinborn, Philip, M, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP QA/RA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2160.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834358

Amount of Each Receipt this Period

90.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

270.00

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 836 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Steinborn, Philip, M.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP QA/RA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877652

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Steinborn, Philip, M.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP QA/RA AMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2340.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878088

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Steinhaus, David, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Heart Failure

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888633

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

330.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 837 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Steinhaus, David, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Heart Failure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889111

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Steinhaus, David, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Heart Failure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156761

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Steinhaus, David, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Heart Failure

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156874

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 838 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Steinhaus, David, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Heart Failure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157881

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Steinhaus, David, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Heart Failure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2850.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157320

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Steinhaus, David, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Heart Failure

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571412

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 839 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Steinhaus, David, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Heart Failure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3150.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534655

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Steinhaus, David, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Heart Failure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536841

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Steinhaus, David, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Heart Failure

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3450.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856987

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 840 OF 1014
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Steinhaus, David, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Heart Failure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2017

Transaction ID : A2017-2834205

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Steinhaus, David, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Heart Failure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2017

Transaction ID : A2017-2877404

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Steinhaus, David, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM Heart Failure

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2017

Transaction ID : A2017-2877842

Amount of Each Receipt this Period

150.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

450.00

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 841 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stennes, Matthew, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Investig/New Bus Models

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888486

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stennes, Matthew, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Investig/New Bus Models

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889184

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stennes, Matthew, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Investig/New Bus Models

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156501

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 842 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stennes, Matthew, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl Investig/New Bus Models

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M	D D	Y Y Y Y
08	25	2017

Transaction ID : A2017-2157067

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stennes, Matthew, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl Investig/New Bus Models

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M	D D	Y Y Y Y
09	08	2017

Transaction ID : A2017-2157690

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stennes, Matthew, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl Investig/New Bus Models

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M	D D	Y Y Y Y
09	22	2017

Transaction ID : A2017-2157513

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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 843 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stennes, Matthew, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl Investig/New Bus Models

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 06 / 2017

Transaction ID : A2017-2571254

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stennes, Matthew, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl Investig/New Bus Models

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 20 / 2017

Transaction ID : A2017-2534559

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stennes, Matthew, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl Investig/New Bus Models

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 03 / 2017

Transaction ID : A2017-2536671

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

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 844 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stennes, Matthew, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl Investig/New Bus Models

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2856944

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stennes, Matthew, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl Investig/New Bus Models

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834302

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stennes, Matthew, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl Investig/New Bus Models

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877596

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 845 OF 1014

(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stennes, Matthew, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl Investig/New Bus Models

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2878032

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stoltenberg, Laura, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM NDT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2017

Transaction ID : A2017-1888460

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stoltenberg, Laura, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM NDT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2017

Transaction ID : A2017-1889156

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 846 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stoltenberg, Laura, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM NDT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156473

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stoltenberg, Laura, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM NDT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157039

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stoltenberg, Laura, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM NDT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157662

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 847 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stoltenberg, Laura, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM NDT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157485

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stoltenberg, Laura, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM NDT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571228

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stoltenberg, Laura, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM NDT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534819

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 848 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stoltenberg, Laura, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM NDT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536568

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stoltenberg, Laura, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM NDT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856916

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stoltenberg, Laura, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP/GM NDT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834274

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

150.00

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 849 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stoltenberg, Laura, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM NDT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877568

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stoltenberg, Laura, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM NDT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878004

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stovall, Thomas, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Controller Fin Ops MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534871

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

PAGE 850 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stovall, Thomas, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Controller Fin Ops MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536787

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stovall, Thomas, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Controller Fin Ops MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857224

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stovall, Thomas, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Controller Fin Ops MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2833981

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 851 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stovall, Thomas, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Controller Fin Ops MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877712

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stovall, Thomas, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Controller Fin Ops MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878148

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stuppy, Ana, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Cardiology District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877751

Amount of Each Receipt this Period

8.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.00

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 852 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Subramaniam, Chandramohan, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

07 / 14 / 2017

Transaction ID : A2017-1888587

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Subramaniam, Chandramohan, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

07 / 28 / 2017

Transaction ID : A2017-1888991

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Subramaniam, Chandramohan, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156717

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 853 OF 1014

(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Subramaniam, Chandramohan, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP R/D RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156831

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Subramaniam, Chandramohan, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP R/D RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157838

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Subramaniam, Chandramohan, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP R/D RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157277

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 854 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Subramaniam, Chandramohan, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571370

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Subramaniam, Chandramohan, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534520

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Subramaniam, Chandramohan, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536639

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Subramaniam, Chandramohan, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857312

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Subramaniam, Chandramohan, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834163

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Subramaniam, Chandramohan, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877301

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Subramaniam, Chandramohan, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP R/D RTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877801

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Suttle, Virginia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888522

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Suttle, Virginia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889276

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 857 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Suttle, Virginia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156652

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Suttle, Virginia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156767

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Suttle, Virginia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157774

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 858 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Suttle, Virginia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157213

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Suttle, Virginia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571306

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Suttle, Virginia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534508

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 859 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Suttle, Virginia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536575

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Suttle, Virginia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857249

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Suttle, Virginia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834135

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 860 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Suttle, Virginia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877334

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Suttle, Virginia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Supply Chain Planning Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-287738

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Swafford, Markham, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1366.16

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888473

Amount of Each Receipt this Period

11.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

111.84

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 861 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Swafford, Markham, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1558.16

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889169

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Swafford, Markham, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1569.99

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156486

Amount of Each Receipt this Period

11.83

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Swafford, Markham, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1761.99

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157052

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

395.83

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 862 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Swafford, Markham, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1775.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157675

Amount of Each Receipt this Period

13.82

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Swafford, Markham, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1967.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157498

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Swafford, Markham, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1979.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571241

Amount of Each Receipt this Period

11.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

217.66

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 863 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Swafford, Markham, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2171.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534832

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Swafford, Markham, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2183.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : A2017-2536658

Amount of Each Receipt this Period

11.83

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Swafford, Markham, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2195.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2017

Transaction ID : A2017-2856929

Amount of Each Receipt this Period

11.83

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

215.66

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 864 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Swafford, Markham, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2387.31

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834287

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Swafford, Markham, R, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Spinal Sales Rep 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2579.31

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878017

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Swanson, Cheryl, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin Regulatory Affair Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534524

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

394.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 865 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Swanson, Cheryl, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Regulatory Affair Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536643

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Swanson, Cheryl, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Regulatory Affair Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857316

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Swanson, Cheryl, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Regulatory Affair Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834167

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 866 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Swanson, Cheryl, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Regulatory Affair Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877367

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Swanson, Cheryl, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin Regulatory Affair Spec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877805

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Tait, Rita, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888772

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

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 867 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Tait, Rita, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888919

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Tait, Rita, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156572

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Tait, Rita, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Mktg Communications Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157137

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 868 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Taylor, Danny, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Customer Service Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 14 / 2017

Transaction ID : A2017-1888619

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Taylor, Danny, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Customer Service Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

07 / 28 / 2017

Transaction ID : A2017-1889097

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Taylor, Danny, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Customer Service Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156748

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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 869 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Taylor, Danny, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Customer Service Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156862

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Taylor, Danny, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Customer Service Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157869

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Taylor, Danny, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Customer Service Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157308

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 870 OF 1014

(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Taylor, Danny, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Customer Service Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2017

Transaction ID : A2017-2571400

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Taylor, Danny, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Customer Service Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

Transaction ID : A2017-2534643

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Taylor, Danny, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Customer Service Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2017

Transaction ID : A2017-2536829

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 871 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Taylor, Danny, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Customer Service Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856975

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Taylor, Danny, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Customer Service Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834193

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Taylor, Danny, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Customer Service Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877392

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

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 872 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Taylor, Danny, L, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Customer Service Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877830

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Terry, Michael, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888509

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Terry, Michael, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889207

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 873 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Terry, Michael, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156524

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Terry, Michael, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157089

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Terry, Michael, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

342.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157712

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.00

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 874 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Terry, Michael, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157534

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Terry, Michael, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571275

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Terry, Michael, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534580

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 875 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Terry, Michael, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 03 / 2017

Transaction ID : A2017-2536692

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Terry, Michael, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 17 / 2017

Transaction ID : A2017-2857128

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Terry, Michael, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 01 / 2017

Transaction ID : A2017-2834323

Amount of Each Receipt this Period

19.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.00

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 876 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Terry, Michael, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877617

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Terry, Michael, B, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IC Design Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878053

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Thomassy, Mark, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888478

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 877 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Thomassy, Mark, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889174

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Thomassy, Mark, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156491

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Thomassy, Mark, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157057

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 878 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Thomassy, Mark, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157680

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Thomassy, Mark, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157503

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Thomassy, Mark, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571246

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 879 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Thomassy, Mark, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534550

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Thomassy, Mark, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536663

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Thomassy, Mark, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856934

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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 880 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Thomassy, Mark, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834292

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Thomassy, Mark, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877586

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Thomassy, Mark, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Strategic Accounts Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878022

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 881 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Thomsen, Allen, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534515

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Thomsen, Allen, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536582

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Thomsen, Allen, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857256

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 882 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Thomsen, Allen, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834142

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Thomsen, Allen, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877341

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Thomsen, Allen, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877745

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

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 883 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Townsend, Richard, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888770

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Townsend, Richard, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888917

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Townsend, Richard, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156571

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 884 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Townsend, Richard, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157136

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Townsend, Richard, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157759

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Townsend, Richard, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157581

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 885 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Townsend, Richard, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571555

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Townsend, Richard, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534626

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Townsend, Richard, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536738

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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 886 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Townsend, Richard, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857174

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Townsend, Richard, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834368

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Townsend, Richard, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877662

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 887 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Townsend, Richard, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Representative III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878098

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Tuch, Anita, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ops Neuro

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534463

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Tuch, Anita, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ops Neuro

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536594

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 888 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Tuch, Anita, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Ops Neuro

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857268

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Tuch, Anita, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Ops Neuro

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834154

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Tuch, Anita, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Ops Neuro

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877324

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

30.00

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 889 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Tuch, Anita, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Ops Neuro

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877757

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Tuch, Ronald, J, ,

Mailing Address 8200 Coral Sea Street NE

City
Mounds View

State
MN

Zip Code
55112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Risk Management Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534635

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Tuch, Ronald, J, ,

Mailing Address 8200 Coral Sea Street NE

City
Mounds View

State
MN

Zip Code
55112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Risk Management Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536747

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 890 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Tuch, Ronald, J, ,

Mailing Address 8200 Coral Sea Street NE

City

Mounds View

State

MN

Zip Code

55112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Risk Management Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857183

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Tuch, Ronald, J, ,

Mailing Address 8200 Coral Sea Street NE

City

Mounds View

State

MN

Zip Code

55112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Risk Management Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834377

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Tuch, Ronald, J, ,

Mailing Address 8200 Coral Sea Street NE

City

Mounds View

State

MN

Zip Code

55112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Risk Management Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877671

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 891 OF 1014

(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Tuch, Ronald, J, ,

Mailing Address 8200 Coral Sea Street NE

City

Mounds View

State

MN

Zip Code

55112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sr Risk Management Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878107

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ueda, Kana, , ,

Mailing Address 710 Medtronic Parkway NE

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sales/Marketing Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888425

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ueda, Kana, , ,

Mailing Address 710 Medtronic Parkway NE

City

Minneapolis

State

MN

Zip Code

55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Sales/Marketing Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889048

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ueda, Kana, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales/Marketing Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156437

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ueda, Kana, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales/Marketing Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157005

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ueda, Kana, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales/Marketing Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2158012

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 893 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ueda, Kana, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales/Marketing Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157451

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ueda, Kana, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales/Marketing Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571195

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ueda, Kana, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales/Marketing Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534785

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ueda, Kana, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales/Marketing Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536536

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ueda, Kana, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales/Marketing Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856884

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ueda, Kana, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales/Marketing Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834065

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 895 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ueda, Kana, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sales/Marketing Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877535

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ueda, Kana, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sales/Marketing Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877972

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Van Danacker, John, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877960

Amount of Each Receipt this Period

8.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

108.00

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 896 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vilkhoo, Kamaljit, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888424

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vilkhoo, Kamaljit, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889047

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vilkhoo, Kamaljit, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156436

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 897 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vilkhoo, Kamaljit, S, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157004

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vilkhoo, Kamaljit, S, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2158011

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vilkhoo, Kamaljit, S, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157450

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 898 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vilkhoo, Kamaljit, S, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

Transaction ID : A2017-2571194

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vilkhoo, Kamaljit, S, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534784

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vilkhoo, Kamaljit, S, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : A2017-2536535

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 899 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vilkhoo, Kamaljit, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856883

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vilkhoo, Kamaljit, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834064

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vilkhoo, Kamaljit, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877534

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

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 900 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vilkhoo, Kamaljit, S, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Prin IT Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877971

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vivanco, Carlos, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888671

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vivanco, Carlos, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888852

Amount of Each Receipt this Period

26.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 901 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vivanco, Carlos, F, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Transaction ID : A2017-2156340

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vivanco, Carlos, F, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2017

Transaction ID : A2017-2156911

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vivanco, Carlos, F, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2017

Transaction ID : A2017-2157918

Amount of Each Receipt this Period

26.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

78.00

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 902 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vivanco, Carlos, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157357

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vivanco, Carlos, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571449

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vivanco, Carlos, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

546.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534692

Amount of Each Receipt this Period

26.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.00

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 903 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vivanco, Carlos, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Date of Receipt

11 / 03 / 2017

Transaction ID : A2017-2536878

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vivanco, Carlos, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857024

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vivanco, Carlos, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

624.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834242

Amount of Each Receipt this Period

26.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 904 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vivanco, Carlos, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877441

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vivanco, Carlos, F, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Comm Generalist Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

676.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877878

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vogl, James, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Servs/Mon

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888729

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

132.00

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 905 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vogl, James, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Servs/Mon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889010

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vogl, James, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Servs/Mon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156399

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vogl, James, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Servs/Mon

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156969

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 906 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vogl, James, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Servs/Mon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157976

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vogl, James, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Servs/Mon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157415

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vogl, James, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Servs/Mon

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571506

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 907 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vogl, James, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Servs/Mon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534749

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vogl, James, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Servs/Mon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536500

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vogl, James, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Servs/Mon

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857082

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

PAGE 908 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vogl, James, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Servs/Mon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834029

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vogl, James, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Servs/Mon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877499

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vogl, James, W, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP/GM Patient Servs/Mon

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877936

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 909 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Volk, Brian, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888576

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Volk, Brian, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888980

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Volk, Brian, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156706

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 910 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Volk, Brian, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156821

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Volk, Brian, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157828

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Volk, Brian, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157267

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 911 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Volk, Brian, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571360

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Volk, Brian, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534498

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Volk, Brian, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536629

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 912 OF 1014

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Volk, Brian, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857302

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Volk, Brian, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834125

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Volk, Brian, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877306

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 913 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Volk, Brian, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877791

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Walker, Cynthia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl MedEd/Cust Insight CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888614

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Walker, Cynthia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl MedEd/Cust Insight CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889092

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

100.00

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 914 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Walker, Cynthia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl MedEd/Cust Insight CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156743

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Walker, Cynthia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl MedEd/Cust Insight CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156857

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Walker, Cynthia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

VP Gbl MedEd/Cust Insight CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157864

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 915 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Walker, Cynthia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl MedEd/Cust Insight CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157303

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Walker, Cynthia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl MedEd/Cust Insight CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571395

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Walker, Cynthia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl MedEd/Cust Insight CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534546

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 916 OF 1014

(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Walker, Cynthia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl MedEd/Cust Insight CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536824

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Walker, Cynthia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl MedEd/Cust Insight CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856970

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Walker, Cynthia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl MedEd/Cust Insight CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834188

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 917 OF 1014

(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Walker, Cynthia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl MedEd/Cust Insight CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877388

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Walker, Cynthia, A, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl MedEd/Cust Insight CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877826

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Walton, Brian, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156822

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

22.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 918 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Walton, Brian, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2017

Transaction ID : A2017-2157829

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Walton, Brian, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Transaction ID : A2017-2157268

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Walton, Brian, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

Transaction ID : A2017-2571361

Amount of Each Receipt this Period

12.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

36.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 919 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Walton, Brian, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A2017-2534499

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Walton, Brian, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : A2017-2536630

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Walton, Brian, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2017

Transaction ID : A2017-2857303

Amount of Each Receipt this Period

12.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

36.00

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 920 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Walton, Brian, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834126

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Walton, Brian, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877307

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Walton, Brian, E, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Pain Therapies DM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877792

Amount of Each Receipt this Period

12.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

36.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 921 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wasiluk, Scott, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Quality/Reg Aff Prog Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2017

Transaction ID : A2017-1888794

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wasiluk, Scott, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Quality/Reg Aff Prog Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : A2017-1888942

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wasiluk, Scott, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Quality/Reg Aff Prog Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Transaction ID : A2017-2156595

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 922 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wasiluk, Scott, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Quality/Reg Aff Prog Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2017

Transaction ID : A2017-2157159

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wasiluk, Scott, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Quality/Reg Aff Prog Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2017

Transaction ID : A2017-2158047

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wasiluk, Scott, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Quality/Reg Aff Prog Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Transaction ID : A2017-2157603

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 923 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wasiluk, Scott, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality/Reg Aff Prog Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571576

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wasiluk, Scott, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality/Reg Aff Prog Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534843

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wasiluk, Scott, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality/Reg Aff Prog Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536759

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 924 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wasiluk, Scott, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Quality/Reg Aff Prog Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2017

Transaction ID : A2017-2857196

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wasiluk, Scott, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Quality/Reg Aff Prog Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834390

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wasiluk, Scott, A, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Quality/Reg Aff Prog Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877684

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 925 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wasiluk, Scott, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Quality/Reg Aff Prog Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878120

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wawrzynski, Richard, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Physician Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888771

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wawrzynski, Richard, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Physician Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888918

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 926 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wawrzynski, Richard, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Physician Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156570

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wawrzynski, Richard, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Physician Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157135

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wawrzynski, Richard, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Physician Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157758

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 927 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wawrzynski, Richard, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Physician Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157580

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wawrzynski, Richard, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Physician Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571554

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wawrzynski, Richard, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Physician Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534625

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 928 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wawrzynski, Richard, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Physician Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536737

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wawrzynski, Richard, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Physician Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857173

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wawrzynski, Richard, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Physician Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834367

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 929 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wawrzynski, Richard, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Physician Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877661

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wawrzynski, Richard, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Physician Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2878097

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Webb, Karen, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medtronic Inc.

Occupation (for Individual)

Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

Transaction ID : A2017-2534787

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

50.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 930 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Webb, Karen, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2017

Transaction ID : A2017-2536538

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Webb, Karen, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2017

Transaction ID : A2017-2856886

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Webb, Karen, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834067

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

30.00

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 931 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Webb, Karen, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877538

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Webb, Karen, S, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877974

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weidman, Jason, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President APV

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888705

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 932 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weidman, Jason, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President APV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888887

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Weidman, Jason, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President APV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156375

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weidman, Jason, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President APV

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156945

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 933 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weidman, Jason, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President APV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157952

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Weidman, Jason, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President APV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157391

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weidman, Jason, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President APV

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571482

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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 934 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weidman, Jason, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President APV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534725

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Weidman, Jason, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President APV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536911

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weidman, Jason, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
SVP/President APV

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857058

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 935 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weidman, Jason, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President APV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2017

Transaction ID : A2017-2834005

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Weidman, Jason, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President APV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2017

Transaction ID : A2017-2877475

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weidman, Jason, R, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
SVP/President APV

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

Transaction ID : A2017-2877912

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 936 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weigel, Kyle, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Field Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888456

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Weigel, Kyle, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Field Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889152

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weigel, Kyle, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Field Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156469

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

45.00

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 937 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weigel, Kyle, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Field Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157035

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Weigel, Kyle, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Field Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157658

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weigel, Kyle, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Field Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157481

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

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 938 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weigel, Kyle, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Field Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571224

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Weigel, Kyle, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Field Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534815

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weigel, Kyle, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Field Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536564

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

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 939 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weigel, Kyle, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Field Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856912

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Weigel, Kyle, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Field Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834093

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weigel, Kyle, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Field Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877564

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 940 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weigel, Kyle, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Field Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878000

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Weiss, Lawrence, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2030.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888462

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weiss, Lawrence, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2180.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889158

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

315.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 941 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weiss, Lawrence, T, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Legal MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2330.76

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156475

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Weiss, Lawrence, T, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Legal MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2480.76

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157041

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weiss, Lawrence, T, ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
VP Legal MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2630.76

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157664

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

450.00

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 942 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weiss, Lawrence, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2780.76

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157487

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Weiss, Lawrence, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2930.76

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571230

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weiss, Lawrence, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3080.76

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534821

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

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 943 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weiss, Lawrence, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3230.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536570

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Weiss, Lawrence, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3380.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856918

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weiss, Lawrence, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3530.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834276

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

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 944 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weiss, Lawrence, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3680.76

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877570

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Weiss, Lawrence, T, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Legal MITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3830.76

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878006

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Werner, Desta, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534665

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

310.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 945 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Werner, Desta, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536851

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Werner, Desta, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856997

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Werner, Desta, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834215

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 946 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Werner, Desta, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877414

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Werner, Desta, A, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877852

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wesley, Kyle, M, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Product Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878001

Amount of Each Receipt this Period

8.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 947 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. White, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2688.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888565

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. White, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2880.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888969

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. White, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3072.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156695

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 948 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. White, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3264.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156810

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. White, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3456.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157817

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. White, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3648.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157256

Amount of Each Receipt this Period

192.00

☐ Memo Item

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 949 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. White, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3840.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571349

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. White, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4032.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534487

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. White, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4224.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536618

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 950 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. White, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4416.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857291

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. White, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4608.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834114

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. White, Robert, J, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877313

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 951 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. White, Robert, J.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877780

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Whitmore, David, S, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877843

Amount of Each Receipt this Period

8.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wikstrom, Paul, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888756

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

215.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 952 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wikstrom, Paul, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M	D D	Y Y Y Y
07	28	2017

Transaction ID : A2017-1888903

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wikstrom, Paul, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M	D D	Y Y Y Y
08	11	2017

Transaction ID : A2017-2156556

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wikstrom, Paul, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Sr Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M	D D	Y Y Y Y
08	25	2017

Transaction ID : A2017-2157121

Amount of Each Receipt this Period

15.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

45.00

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 953 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wikstrom, Paul, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2017

Transaction ID : A2017-2157744

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wikstrom, Paul, C, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2017

Transaction ID : A2017-2157566

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Williams, Michael, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
07 / 14 / 2017

Transaction ID : A2017-1888497

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 954 OF 1014

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Williams, Michael, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889195

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Williams, Michael, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156512

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Williams, Michael, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2157077

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

45.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Williams, Michael, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157700

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Williams, Michael, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157523

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Williams, Michael, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 06 / 2017

Transaction ID : A2017-2571264

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Williams, Michael, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534569

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Williams, Michael, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536681

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Williams, Michael, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857117

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Williams, Michael, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834312

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Williams, Michael, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877606

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Williams, Michael, P, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878042

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 958 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Williams, Shawn, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534850

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Williams, Shawn, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536766

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Williams, Shawn, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857203

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:
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PAGE 959 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Williams, Shawn, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834397

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Williams, Shawn, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877691

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Williams, Shawn, D, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin Sales Rep CRHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878127

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 960 OF 1014

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wilson, Amy, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888534

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wilson, Amy, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889288

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wilson, Amy, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 11 / 2017

Transaction ID : A2017-2156664

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 961 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wilson, Amy, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156779

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wilson, Amy, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157786

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wilson, Amy, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 22 / 2017

Transaction ID : A2017-2157225

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 962 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wilson, Amy, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571318

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wilson, Amy, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534456

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wilson, Amy, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536587

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 963 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wilson, Amy, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857261

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wilson, Amy, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834147

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wilson, Amy, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877346

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wilson, Amy, L, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
HR Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877750

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wilson, Scott, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Supply Chain Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534844

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wilson, Scott, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Supply Chain Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536760

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wilson, Scott, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Supply Chain Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 17 / 2017

Transaction ID : A2017-2857197

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wilson, Scott, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Supply Chain Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 01 / 2017

Transaction ID : A2017-2834391

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wilson, Scott, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Supply Chain Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 15 / 2017

Transaction ID : A2017-2877685

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wilson, Scott, D, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Supply Chain Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878121

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wisniewski, Paul, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888757

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wisniewski, Paul, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1888904

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wisnewski, Paul, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156557

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wisnewski, Paul, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2157122

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wisnewski, Paul, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

540.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157745

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wisniewski, Paul, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157567

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wisniewski, Paul, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571541

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wisniewski, Paul, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534612

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wisnewski, Paul, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536724

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wisnewski, Paul, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857160

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wisnewski, Paul, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834354

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wisnewski, Paul, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877648

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wisnewski, Paul, J, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Engineering Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878084

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wolden, Al, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 25 / 2017

Transaction ID : A2017-2156775

Amount of Each Receipt this Period

12.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

72.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wolden, Al, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2017

Transaction ID : A2017-2157782

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wolden, Al, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157221

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wolden, Al, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571314

Amount of Each Receipt this Period

12.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wolden, Al, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534516

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wolden, Al, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536583

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wolden, Al, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

287.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857257

Amount of Each Receipt this Period

12.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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37.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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PAGE 973 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wolden, Al, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834143

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wolden, Al, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877342

Amount of Each Receipt this Period

12.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wolden, Al, R, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877746

Amount of Each Receipt this Period

12.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 974 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wootten, David, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Clinical Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	14	/	2017

Transaction ID : A2017-1888635

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wootten, David, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Clinical Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	28	/	2017

Transaction ID : A2017-1889113

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wootten, David, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Clinical Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	11	/	2017

Transaction ID : A2017-2156763

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

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 975 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wootten, David, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Clinical Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

MM / DD / YYYY
08 / 25 / 2017

Transaction ID : A2017-2156876

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wootten, David, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Clinical Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2017

Transaction ID : A2017-2157883

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wootten, David, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Clinical Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

MM / DD / YYYY
09 / 22 / 2017

Transaction ID : A2017-2157322

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 976 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wootten, David, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Clinical Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571414

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wootten, David, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Clinical Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534657

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wootten, David, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Clinical Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536843

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 977 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wootten, David, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Clinical Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856989

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wootten, David, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Clinical Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834207

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wootten, David, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Clinical Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877406

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 978 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wooten, David, F, Mr.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Clinical Prog Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877844

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Yerich, Charles, G, ,

Mailing Address 18000 Devonshire Street

City
Northridge

State
CA

Zip Code
91325-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Mktg DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888607

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Yerich, Charles, G, ,

Mailing Address 18000 Devonshire Street

City
Northridge

State
CA

Zip Code
91325-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Mktg DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : A2017-1889084

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 979 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Yerich, Charles, G, ,

Mailing Address 18000 Devonshire Street

City
Northridge

State
CA

Zip Code
91325-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Mktg DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 11 / 2017

Transaction ID : A2017-2156735

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Yerich, Charles, G, ,

Mailing Address 18000 Devonshire Street

City
Northridge

State
CA

Zip Code
91325-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Mktg DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

08 / 25 / 2017

Transaction ID : A2017-2156849

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Yerich, Charles, G, ,

Mailing Address 18000 Devonshire Street

City
Northridge

State
CA

Zip Code
91325-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Mktg DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 08 / 2017

Transaction ID : A2017-2157856

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 980 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Yerich, Charles, G, ,

Mailing Address 18000 Devonshire Street

City
Northridge

State
CA

Zip Code
91325-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Mktg DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : A2017-2157295

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Yerich, Charles, G, ,

Mailing Address 18000 Devonshire Street

City
Northridge

State
CA

Zip Code
91325-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Mktg DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2017

Transaction ID : A2017-2571388

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Yerich, Charles, G, ,

Mailing Address 18000 Devonshire Street

City
Northridge

State
CA

Zip Code
91325-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Mktg DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534538

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 981 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Yerich, Charles, G, ,

Mailing Address 18000 Devonshire Street

City
Northridge

State
CA

Zip Code
91325-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Mktg DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536817

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Yerich, Charles, G, ,

Mailing Address 18000 Devonshire Street

City
Northridge

State
CA

Zip Code
91325-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Mktg DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2856962

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Yerich, Charles, G, ,

Mailing Address 18000 Devonshire Street

City
Northridge

State
CA

Zip Code
91325-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Mktg DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834181

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 982 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Yerich, Charles, G, ,

Mailing Address 18000 Devonshire Street

City
Northridge

State
CA

Zip Code
91325-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Mktg DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877381

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Yerich, Charles, G, ,

Mailing Address 18000 Devonshire Street

City
Northridge

State
CA

Zip Code
91325-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
VP Gbl Mktg DIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877819

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Young, Jennifer, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep II - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534740

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 983 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Young, Jennifer, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep II - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536926

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Young, Jennifer, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep II - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857073

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Young, Jennifer, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep II - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834020

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 984 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Young, Jennifer, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep II - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877490

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Young, Jennifer, E, ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sales Rep II - Med/Scientific

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877927

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Zemlok, Michael, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.12

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 14 / 2017

Transaction ID : A2017-1888498

Amount of Each Receipt this Period

26.08

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.08

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 985 OF 1014

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Zemlok, Michael, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : A2017-1889196

Amount of Each Receipt this Period

26.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Zemlok, Michael, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Transaction ID : A2017-2156513

Amount of Each Receipt this Period

26.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Zemlok, Michael, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

445.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2017

Transaction ID : A2017-2157078

Amount of Each Receipt this Period

26.73

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

80.19

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 986 OF 1014
(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. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Zemlok, Michael, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2017

Transaction ID : A2017-2157701

Amount of Each Receipt this Period

26.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Zemlok, Michael, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.77

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2017

Transaction ID : A2017-2157524

Amount of Each Receipt this Period

26.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Zemlok, Michael, , ,

Mailing Address 710 Medtronic Parkway NE

City
MinneapolisState
MNZip Code
55432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2017

Transaction ID : A2017-2571265

Amount of Each Receipt this Period

26.73

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

80.19

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 987 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Zemlok, Michael, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.23

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534570

Amount of Each Receipt this Period

26.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Zemlok, Michael, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.96

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536682

Amount of Each Receipt this Period

26.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Zemlok, Michael, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

605.69

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857118

Amount of Each Receipt this Period

26.73

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.19

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 988 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Zemlok, Michael, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.42

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834313

Amount of Each Receipt this Period

26.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Zemlok, Michael, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

659.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877607

Amount of Each Receipt this Period

26.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Zemlok, Michael, , ,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Prin R-D Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

685.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2878043

Amount of Each Receipt this Period

26.73

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.19

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 989 OF 1014

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ziebell, Anne, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2017

Transaction ID : A2017-2534464

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ziebell, Anne, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2017

Transaction ID : A2017-2536595

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ziebell, Anne, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2017

Transaction ID : A2017-2857269

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 990 OF 1014

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ziebell, Anne, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2017

Transaction ID : A2017-2834155

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ziebell, Anne, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2017

Transaction ID : A2017-2877325

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ziebell, Anne, M, Ms.,

Mailing Address 710 Medtronic Parkway NE

City
Minneapolis

State
MN

Zip Code
55432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medtronic Inc.

Occupation (for Individual)
Sr Legal Program Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2017

Transaction ID : A2017-2877758

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

139050.69

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 991 OF 1014
(check only one)

<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jeff Flake for US Senate Inc.

Mailing Address PO Box 12512

City
TempeState
AZZip Code
85284FEC ID number of contributing
federal political committee.**C**

C00347260

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2018

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2017

Transaction ID : A2017-16172

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Refund; original date of contribution 6/17/2016

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jeff Flake for US Senate Inc.

Mailing Address PO Box 12512

City
TempeState
AZZip Code
85284FEC ID number of contributing
federal political committee.**C**

C00347260

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2018

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2017

Transaction ID : A2017-16171

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Refund; original date of contribution 5/4/2016

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify)
☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

3000.00

TOTAL This Period (last page this line number only).....▶

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 992 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Bob Corker For Senate 2018 Inc.

Mailing Address 4515 Harding Pike Suite 110

City
NashvilleState
TNZip Code
37205Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Corker, Robert (Bob), P, , Jr.

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2018

☒ Primary☐ General☐ Other (specify) ▼

State: TN

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	7				3	1					2	0	1	7

FEC Identification Number

C C00430462

Transaction ID : B662485

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Diana DeGette for Congress Inc.

Mailing Address 228 2nd Street S.E.

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

DeGette, Diana, L, ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2018

☒ Primary☐ General☐ Other (specify) ▼

State: CO

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	7				3	1					2	0	1	7

FEC Identification Number

C C00311639

Transaction ID : B662486

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Enzi for US Senate

Mailing Address 1020 N. Fairfax St. Suite 201

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Enzi, Michael, B, ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2020

☒ Primary☐ General☐ Other (specify) ▼

State: WY

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	7				3	1					2	0	1	7

FEC Identification Number

C C00317503

Transaction ID : B662490

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 993 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Hurd for Congress

Mailing Address 526 6th Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Hurd, William, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX

District: 23

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	7				3	1					2	0	1	7

FEC Identification Number

C C00545467**Transaction ID : B662488**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kay Granger Campaign Fund

Mailing Address 1747 Pennsylvania Ave. NW Suite 11

City
WashingtonState
DCZip Code
20006Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Granger, Kay, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX

District: 12

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	7				3	1					2	0	1	7

FEC Identification Number

C C00310532**Transaction ID : B662489**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Burgess for Congress

Mailing Address PO Box 30844

City
BethesdaState
MDZip Code
20824Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Burgess, Michael C., , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX

District: 26

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	7				3	1					2	0	1	7

FEC Identification Number

C C00372532**Transaction ID : B662484**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 994 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Tim Scott For US Senate

Mailing Address 499 S. Capitol St.SW STE 420

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Scott, Tim, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: SC

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				3	1		2	0	1	7		

FEC Identification Number

C C00540302

Transaction ID : B662487

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DelBene for Congress

Mailing Address 499 S. Capitol StSW Ste 422

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

DelBene, Suzan, K, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: WA

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				1	4		2	0	1	7		

FEC Identification Number

C C00459099

Transaction ID : B662854

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Todd Young Inc.

Mailing Address 526 6th Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Young, Todd, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				1	4		2	0	1	7		

FEC Identification Number

C C00459255

Transaction ID : B662856

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 995 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Tom Reed For Congress

Mailing Address 104 Hume Ave

City
AlexandriaState
VAZip Code
22305Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Reed, Tom, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 23

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	4			2	0	1	7		

FEC Identification Number

C C00464032**Transaction ID : B662855**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Al Franken for Senate

Mailing Address 200 East Jefferson Street

City
Falls ChurchState
VAZip Code
22046Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Franken, Al, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: MN

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	7		

FEC Identification Number

C C00570960**Transaction ID : B665795**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bennet for Colorado

Mailing Address 328 Massachusetts Ave. NE

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Bennet, Michael, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: CO

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	7		

FEC Identification Number

C C00491936**Transaction ID : B665794**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Emmer for Congress

Mailing Address 412 S. Capitol St. SE Suite B

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Emmer, Tom, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	7		

FEC Identification Number

C C00545749**Transaction ID : B665776**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Chris Murphy

Mailing Address 415 New Jersey Ave. SE Suite 1

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Murphy, Christopher, , ,Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify)

State: CT District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	7		

FEC Identification Number

C C00492645**Transaction ID : B665799**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Himes for Congress

Mailing Address 415 New Jersey Ave. SE Suite 1

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Himes, Jim, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

State: CT District: 04

Convention

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	7		

FEC Identification Number

C C00434191**Transaction ID : B665773**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 997 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Jeff Flake for US Senate Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Mailing Address PO Box 120697

City
St. PaulState
MNZip Code
55112Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Flake, Jeff, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ

District:

FEC Identification Number

C C00347260

Transaction ID : B665785

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kay Granger Campaign Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Mailing Address 1747 Pennsylvania Ave. NW Suite 11

City
WashingtonState
DCZip Code
20006Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Granger, Kay, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX

District: 12

FEC Identification Number

C C00310532

Transaction ID : B665782

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Klobuchar for Minnesota 2018

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Mailing Address 10 G Street NE Suite 470

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Klobuchar, Amy, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: MN

District:

FEC Identification Number

C C00431353

Transaction ID : B665796

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 998 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Marco Rubio for US Senate

Mailing Address PO Box 558701

City
MiamiState
FLZip Code
33255Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Rubio, Marco, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	7		

FEC Identification Number

C C00458844

Transaction ID : B665774

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. McCollum for Congress

Mailing Address P.O. Box 14131

City
St. PaulState
MNZip Code
55114Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

McCollum, Betty, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MN

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	7		

FEC Identification Number

C C00354688

Transaction ID : B665801

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mike Thompson for Congress

Mailing Address 413 New Jersey Avenue SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Thompson, Mike, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	7		

FEC Identification Number

C C00326363

Transaction ID : B665772

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 999 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Tenn Political Action Cmte Inc. (Tenn PAC)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Mailing Address 4515 Harding Pike Suite 110

City
NashvilleState
TNZip Code
37205Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2017

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Not Applicable

FEC Identification Number

C C00388421

Transaction ID : B665793

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tom Reed For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Mailing Address PO Box 10847

City
RochesterState
NYZip Code
14610Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Reed, Tom, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 23

FEC Identification Number

C C00464032

Transaction ID : B665797

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Tony Cardenas for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Mailing Address 410 1st St SE Suite 310

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Cardenas, Tony, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 29

FEC Identification Number

C C00498873

Transaction ID : B665798

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1000 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Upton for All of Us

Mailing Address 104 Hume Avenue

City
AlexandriaState
VAZip Code
22301Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Upton, Frederick, S, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MI

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	7		

FEC Identification Number

C C00200584**Transaction ID : B665783**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Moulton for Congress Committee

Mailing Address 415 New Jersey Ave. SE #1

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Moulton, Seth, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MA

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	7		

FEC Identification Number

C C00547240**Transaction ID : B666205**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ben Sasse for US Senate Inc.

Mailing Address 499 S. Capitol St. SW Suite 420

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Sasse, Ben, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NE

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
				1	0			2	0	1	7		

FEC Identification Number

C C00547976**Transaction ID : B668156**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1001 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Cathy M. Rodgers for Congress

Mailing Address P.O. Box 2485

City
SpringfieldState
VAZip Code
22152Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

McMorris Rodgers, Cathy, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: WA

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				24				2017					

FEC Identification Number

C C00390476**Transaction ID : B668144**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Collins for Senator

Mailing Address 1020 N. Fairfax St. Suite 201

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Collins, Susan, M, ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State: ME

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				24				2017					

FEC Identification Number

C C00314575**Transaction ID : B668138**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Davis for Congress/Friends of Davis

Mailing Address 5956 W. Race Avenue

City
ChicagoState
ILZip Code
60644Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Davis, Danny, K, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 07

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				24				2017					

FEC Identification Number

C C00172619**Transaction ID : B668143**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1002 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. DelBene for Congress

Mailing Address 499 S. Capitol St. SW Suite 422

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

DelBene, Suzan, K, ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				24				2017					

FEC Identification Number

C C00459099**Transaction ID : B668153**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of David Schweikert

Mailing Address 499 S. Capitol St. SW Suite 420

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Schweikert, David, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				24				2017					

FEC Identification Number

C C00440727**Transaction ID : B668151**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Erik Paulsen

Mailing Address 1006 Pendleton Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Paulsen, Erik, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				24				2017					

FEC Identification Number

C C00439661**Transaction ID : B668159**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1003 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Friends of John Thune

Mailing Address PO Box 841

City
Sioux FallsState
SDZip Code
57101Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Thune, John, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

State: SD District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	7		

FEC Identification Number

C C00409581**Transaction ID : B668146**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Susan Brooks

Mailing Address 1006 Pendleton Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Brooks, Susan, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2018
☒ Primary ☐ General
☐ Other (specify)

State: IN District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	7		

FEC Identification Number

C C00500207**Transaction ID : B668152**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Todd Young Inc.

Mailing Address 526 6th Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Young, Todd, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	7		

FEC Identification Number

C C00459255**Transaction ID : B668157**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1004 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Gene Green Congressional Campaign

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	7		

Mailing Address PO Box 16128

FEC Identification Number

C C00254185**Transaction ID : B668154**

Amount of Each Disbursement this Period

1000.00

☐ Memo ItemCity
HoustonState
TXZip Code
77222Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Green, Raymond Gene, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX

District: 29

Full Name (Last, First, Middle Initial)

B. Guthrie for Congress

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	7		

Mailing Address 499 S. Capitol St. SW Suite 420

FEC Identification Number

C C00445023**Transaction ID : B668142**

Amount of Each Disbursement this Period

1000.00

☐ Memo ItemCity
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Guthrie, Brett, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: KY

District: 02

Full Name (Last, First, Middle Initial)

C. Jim Banks for Congress Inc.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	7		

Mailing Address P.O. Box 368

FEC Identification Number

C C00577999**Transaction ID : B668141**

Amount of Each Disbursement this Period

1000.00

☐ Memo ItemCity
Falls ChurchState
VAZip Code
22040Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Banks, James, E, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN

District: 03

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1005 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Maggie Hassan for Senate

Mailing Address 220 Eye Street NE Suite 110

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Hassan, Maggie, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	7		

FEC Identification Number

C C00588772**Transaction ID : B668155**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. People for Patty Murray

Mailing Address PO Box 3662

City
SeattleState
WAZip Code
98124Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Murray, Patty, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2022
☒ Primary ☐ General
☐ Other (specify)

State: WA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	7		

FEC Identification Number

C C00257642**Transaction ID : B668140**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Richard E Neal for Congress Cmte

Mailing Address 415 New Jersey Ave. SE #1

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Neal, Richard, E, ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	7		

FEC Identification Number

C C00226522**Transaction ID : B668147**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1006 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Tenn PAC

Mailing Address 4515 Harding Pike Suite 110

City
NashvilleState
TNZip Code
37205Purpose of Disbursement
Contribution

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2017

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	7		

FEC Identification Number

C C00388421

Transaction ID : B668148

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Volunteers for Shimkus

Mailing Address 5 Stonehill Court

City
EdwardsvilleState
ILZip Code
62025Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Shimkus, John, M, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 15

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	7		

FEC Identification Number

C C00258855

Transaction ID : B668149

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Walorski for Congress

Mailing Address 499 S. Capitol St. SW Suite 420

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Walorski, Jackie, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	7		

FEC Identification Number

C C00468579

Transaction ID : B668145

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1007 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Wyden for Senate

Mailing Address P.O. Box 3498

City
PortlandState
ORZip Code
97208Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Wyden, Ron, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: OR

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			24			2017					

FEC Identification Number

C C00308676

Transaction ID : B668139

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Whitfield for Congress Committee

Mailing Address 499 S. Capitol St. SW Suite 420

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Whitfield, Edward, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: KY

District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			31			2017					

FEC Identification Number

C C00289983

Transaction ID : B584032

Amount of Each Disbursement this Period

- 1000.00

Voided: Original check dated
09/28/15☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ameripac: The Fund for A Greater America

Mailing Address 499 S. Capitol St. SW Suite 406

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2017

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Not Applicable

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			05			2017					

FEC Identification Number

C C00271338

Transaction ID : B676323

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

6000.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 1008 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Bluegrass Committee

Mailing Address 228 S. Washington St. Ste. 115

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2017

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	5			2	0	1	7		

FEC Identification Number

C C00235655

Transaction ID : B676331

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Blumenthal for Connecticut

Mailing Address 777 Summer Street

City
StamfordState
CTZip Code
06901Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Blumenthal, Richard, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify)

State: CT

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	5			2	0	1	7		

FEC Identification Number

C C00492991

Transaction ID : B676322

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Buck for Colorado

Mailing Address 4509 Saucon Valley Court

City
AlexandriaState
VAZip Code
22312Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Buck, Kenneth, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: CO

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	5			2	0	1	7		

FEC Identification Number

C C00461368

Transaction ID : B676332

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4500.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 1009 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Bucshon for Congress

Mailing Address 526 6th Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Bucshon, Larry, D, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				05				2017					

FEC Identification Number

C C00468256**Transaction ID : B676326**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Castro for Congress

Mailing Address 114 Lexington Drive

City
Silver SpringState
MDZip Code
20901Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Castro, Joaquin, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX

District: 20

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				05				2017					

FEC Identification Number

C C00497933**Transaction ID : B676327**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Crowley for Congress

Mailing Address 410 1 St SE Ste 310

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Crowley, Joseph, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 14

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				05				2017					

FEC Identification Number

C C00338954**Transaction ID : B676321**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1010 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Dr. Raul Ruiz for Congress Cmte

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		0	5	6		2	0	1	7	8	9

Mailing Address PO Box 15096

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Ruiz, Raul, , MD

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 36

FEC Identification Number

C C00502575

Transaction ID : B676324

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Emmer for Congress

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		0	5	6		2	0	1	7	8	9

Mailing Address 412 S. Capitol St. SE - Ste B

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Emmer, Tom, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MN

District: 06

FEC Identification Number

C C00545749

Transaction ID : B676333

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Getting Stuff Done PAC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		0	5	6		2	0	1	7	8	9

Mailing Address PO Box 25879

City
TempeState
AZZip Code
85285Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2017

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Not Applicable

FEC Identification Number

C C00571182

Transaction ID : B676330

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8500.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 1011 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Jeff Duncan for Congress

Mailing Address 499 S. Capitol St. SW Suite 420

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Duncan, Jeff, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: SC

District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				05				2017					

FEC Identification Number

C C00460550

Transaction ID : B676329

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kustoff for Congress

Mailing Address 499 S. Capitol St. SW Suite 420

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Kustoff, David, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				05				2017					

FEC Identification Number

C C00614826

Transaction ID : B676328

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Marco Rubio for US Senate

Mailing Address 499 S. Capitol St. SW Suite 420

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Rubio, Marco, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				05				2017					

FEC Identification Number

C C00458844

Transaction ID : B676334

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1012 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Walters for Congress

Mailing Address PO BOX 15239

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Walters, Mimi, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 45

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				05				2017					

FEC Identification Number

C C00546853

Transaction ID : B676325

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. EMMER PAC

Mailing Address 412 S. Capitol St. SE Ste B

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2017

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Not Applicable

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				11				2017					

FEC Identification Number

C C00592089

Transaction ID : B676898

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Follow The North Star Fund

Mailing Address 807 Broadway Street NE

City
MinneapolisState
MNZip Code
55413Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2017

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Not Applicable

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				11				2017					

FEC Identification Number

C C00431874

Transaction ID : B676901

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

11000.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 1013 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Hoosiers First PAC

Mailing Address 115 W. Washington St. Suite 1165

City
IndianapolisState
INZip Code
46204Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2017

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	1			2	0	1	7		

FEC Identification Number

C C00492082

Transaction ID : B676900

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Richard Burr Committee

Mailing Address 116 South Royal Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Burr, Richard, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify)

State: NC

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	1			2	0	1	7		

FEC Identification Number

C C00385526

Transaction ID : B676899

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Cory Gardner for Senate

Mailing Address 1020 N. Fairfax St. Suite 201

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Gardner, Cory, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State: CO

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	2			2	0	1	7		

FEC Identification Number

C C00492454

Transaction ID : B677066

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2500.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 1014 OF 1014

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Medtronic Inc. PAC

Full Name (Last, First, Middle Initial)

A. Jason Lewis for Congress

Mailing Address 317 5th Street NE

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Lewis, Jason Mark, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MN

District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2017

FEC Identification Number

C C00589234

Transaction ID : B677988

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00

91500.00