12/03/2008 02:48

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FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

						Office U	Jse Only
1.	NAME OF COMMITTEE (in full)		MAILING LABEL OR PRINT 🗑	Example:If over the line			
Ш	Varian Medical Systems PAC						
L							
ADI	DRESS (number and street)	1212 S	/ictory Blvd				
Ė	Check if different						
L	than previously reported. (ACC)	Burbank				CA L	91502
2.	FEC IDENTIFICATION NUM	IBER 🔻	CIT	Y 🛕	ST	ATE 🛋	ZIPCODE 🛕
	C00450965			S THIS X	NEW (N) OR	AMENDED (A))
4.	TYPE OF REPORT (Choose One)		nthly Feb	20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:			20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	April 15 Quarterly Report(Q			20 (M4)	Jul 20 (M7)	Oct 20 (M10	
	July 15 Quarterly Report(Q	` '	(c) 12-Day PRE-Election Report for the:	Primary	y (12P) ntion (12C)	General (12G) Special (12G)	Runoff (12R)
	October 15 Quarterly Report(Q	3)	rieport for the.	Conver	111011 (120)	Special (120)	
	January 31 Quarterly Report(Y	E)	Electio	n on			in the State of
	July 31 Mid-Year Report(Non-election Year Only) (MY)	n (d)	30-Day Post -Election	X Genera	al (30G)	Runoff (30R)	Special (30S)
	Termination Report (TER)	t	Report for the:	11	04 20	0 0 8	in the CA
		-	Electio	n on			State of
5.	Covering Period 1 0	1 6	2008	thro	ough 11	24 200	3
l ce	rtify that I have examined this I	Report and to	the best of my kno	wledge and beli	ef it is true, correct and	d complete.	
Тур	e or Print Name of Treasurer	Kinde [Ourkee				
Sigi	nature of Treasurer Electron	nically Filed	oy Kinde Durkee		Dat	e 12 0	1 2008
NO.	TE : Submission of false, error	neous, or inc	omplete information	n may subject the	e person signing this F	Report to the penaltie	s of 2 U.S.C 437g.
	Office Use Only						FORM 3X lev. 12/2004)
FF6	SAN026						

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

		FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
٧		or Type Committee Name Irian Medical Systems PAC		
F	epor	t Covering the Period: From:	10 16 2008	To: 0: 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
			COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a)	Cash on Hand January 1		0.00
	(b)	Cash on Hand at Begining of Reporting Period	9503.19	
	(c)	Total Receipts (from Line 19)	3025.00	27225.00
	(d)	Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	12528.19	27225.00
7.	Tota	al Disbursements (from Line 31)	5300.00	19996.81
8.	Rep	sh on Hand at Close of porting Period otract Line 7 from Line 6(d))	7228.19	7228.19
9.	the	ots and Obligations owed TO committee (Itemize all on needule C and/or Schedule D)	0.00	
10.	the	ots and Obligations owed BY committee (Itemize all on needule C and/or Schedule D)	0.00	
		This Committee has qualified as a multic	andidate 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. 06/2004) Page 3

Write or Type Committee Name
Varian Medical Systems PAC

Report Covering the Period:

м м 1 0

From:

^D 1^D 6

2008

-₀. 11

^D 2 4

2008

I. R	eceipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (oth (a) Individuals/P			
Than Politica	Committees (use Schedule A)	3025.00	25900.00
` '	ed	0.00	
(iii) TOTAL (Lines 11	add (a)(i) and (ii)	3025.00	27225.00
(b) Political Party	Committees	0.00	0.00
(such as PA	Cs)utions (add Lines	0.00	0.00
	and (c)) (Carry 33, page 5)	3025.00	27225.00
Transfers From A Party Committees	filiated/Other	0.00	0.00
3. All Loans Receive	d	0.00	0.00
Loan Repayments Offsets To Opera	Receiveding Expenditures	0.00	.00
(Refunds, Rebate (Carry Totals to Li 6. Refunds of Contri	ne 37, page 5)	0.00	0.00
to Federal candida Political Committe	ites and Other	.00	0.00
 Other Federal Red (Dividends, Interest 	eeipts st, etc.)	0.00	0.00
8. Transfers from N	on-Federal and Levin Funds		
(a) Non-Federal A (from Schedu	ccount ile H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer	(add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (ac 12, 13, 14, 15, 16	ld Lines 11(d), , 17, and 18(c))	3025.00	27225.00
20. Total Federal Rec	eipts	3025.00	27225.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 696.81 Expenditures..... (c) Total Operating Expenditures 0.00 696.81 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 5300.00 19300.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) 0.00 0.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 5300.00 19996.81 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 5300.00 19996.81 from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	3025.00	27225.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	3025.00	27225.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	696.81
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	696.81

FE6AN026

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 12 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ai or	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Varian Medical Systems PAC	tatements may not be sold or used by any personame and address of any political committee to	
	Full Name (Last, First, Middle Initial) Keith G Askoff Mailing Address 324 Mercy St. City Mountain View FEC ID number of contributing federal political committee. Name of Employer Varian Medical Systems Inc Receipt For: Primary General	State Zip Code CA 94041 C Occupation Associate General Counsel Aggregate Year-to-Date ▼	Date of Receipt M
 3.	Other (specify) Full Name (Last, First, Middle Initial) Keith G Askoff Mailing Address 324 Mercy St. City Mountain View FEC ID number of contributing federal political committee. Name of Employer	State Zip Code CA 94041 C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
 }.	Varian Mediċal Systems Inc Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Keith G Askoff	Associate General Counsel Aggregate Year-to-Date ▼ 625.00	Date of Receipt
	Mailing Address 324 Mercy St. City Mountain View FEC ID number of contributing federal political committee.	State Zip Code CA 94041	Transaction ID: SA11ai00000000612739 Amount of Each Receipt this Period 125.00
	Name of Employer Varian Medical Systems Inc Receipt For: Primary General Other (specify) ▼	Occupation Associate General Counsel Aggregate Year-to-Date 625.00	
s	SUBTOTAL of Receipts This Page (optional)		375.00
1	OTAL This Period (last page this line number of	only)	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 12 (check only one) X 11a 11b 11c 12 13 14 15 16 17
0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pere	
	Varian Medical Systems PAC		
۸.	Full Name (Last, First, Middle Initial) Jessica Denecour		Date of Receipt
	Mailing Address 222 Ferndale Wy		10 23 2008
	City Redwood City	State Zip Code CA 94062	Transaction ID: SA11ai0000000061272 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer Varian Medical Systems Inc	Occupation CIO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
	Full Name (Last, First, Middle Initial) Jessica Denecour	I	Date of Receipt
	Mailing Address 222 Ferndale Wy	1 1 2 4 2 0 0 8	
	City	State Zip Code	Transaction ID: SA11ai00000000061274
	Redwood City FEC ID number of contributing federal political committee.	CA 94062	Amount of Each Receipt this Period 125.00
	Name of Employer Varian Medical Systems Inc	Occupation CIO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
 :.	Full Name (Last, First, Middle Initial) Jessica Denecour	<u>I</u>	Date of Receipt
	Mailing Address 222 Ferndale Wy		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Redwood City	State Zip Code CA 94062	Transaction ID: SA11ai0000000061273 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer Varian Medical Systems Inc	Occupation CIO	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
Г		I	375.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 12 (check only one) X 11a 11b 11c 12 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Varian Medical Systems PAC	Statements may not be sold or used by any persone name and address of any political committee to	
Full Name (Last, First, Middle Initial) Robert Drubka Mailing Address 5250 S Rainbow BI # City Las Vegas FEC ID number of contributing federal political committee. Name of Employer Varian Medical Systems Inc	State Zip Code NV 89118 C Occupation	Date of Receipt M M M
Receipt For: Primary General Other (specify) ▼	General Manager Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Robert Drubka Mailing Address 5250 S Rainbow BI #	11145	Date of Receipt 1 1 1 3 2 0 0 8
City	State Zip Code	Transaction ID: SA11ai0000000061273
<u>Las Vegas</u>	NV 89118	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Varian Medical Systems Inc	Occupation General Manager	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) Robert Drubka		Date of Receipt
Mailing Address 5250 S Rainbow BI #	1145	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11ai00000000061274
Las Vegas	NV 89118	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Varian Medical Systems Inc	Occupation General Manager	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)		375.00
TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 12 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Varian Medical Systems PAC	d Statements may not be sold or used by any pers he name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Zane Wilson Mailing Address 766 Maranello St City Henderson	State Zip Code NV 89052	Date of Receipt M M M
FEC ID number of contributing federal political committee. Name of Employer Varian Medical Systems Inc Receipt For: Primary General Other (specify)	Occupation Director Aggregate Year-to-Date 2500.00	500.00
Full Name (Last, First, Middle Initial) Zane Wilson Mailing Address 766 Maranello St		Date of Receipt 10 23 2008
City Henderson FEC ID number of contributing federal political committee.	State Zip Code NV 89052	Amount of Each Receipt this Period 500.00
Name of Employer Varian Medical Systems Inc Receipt For: Primary General Other (specify) ▼	Occupation Director Aggregate Year-to-Date ▼ 2500.00	
Full Name (Last, First, Middle Initial) Zane Wilson Mailing Address 766 Maranello St		Date of Receipt
City Henderson FEC ID number of contributing	State Zip Code NV 89052	Transaction ID: SA11ai0000000061274 Amount of Each Receipt this Period 500.00
Name of Employer Varian Medical Systems Inc	Occupation Director	300.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
		1500.00

A.

PAGE 10/12 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 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) Varian Medical Systems PAC Full Name (Last, First, Middle Initial) Date of Receipt George Zdasiuk Mailing Address 48 Hillbrook Dr 13 2008 1.1 City State Zip Code Transaction ID: SA11ai00000000612736 Portola Valley CA 94028 Amount of Each Receipt this Period FEC ID number of contributing 200.00 C federal political committee. Name of Employer Varian Medical Systems Inc Occupation Vice President Receipt For: Aggregate Year-to-Date General Primary 400.00 Other (specify) Full Name (Last, First, Middle Initial) В. George Zdasiuk Date of Receipt Mailing Address 48 Hillbrook Dr 24 2008 City Transaction ID: SA11ai00000000612743 State Zip Code Portola Valley CA 94028 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Varian Medical Systems Inc Occupation Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	400.00
TOTAL This Period (last page this line number only)	•	3025.00

SCHEDULE B (FEC Form 3X)

	Use separate scriedule(s)	(check only	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
Any Information copied from such Reports and or for commercial purposes, other than using the			for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Varian Medical Systems PAC			
Full Name (Last, First, Middle Initial) Friends For Harry Reid			Transaction ID: SB23000000000000000000000000000000000000
Mailing Address PO Box 85223			$\begin{bmatrix}\begin{smallmatrix}M\\10\end{smallmatrix}\end{bmatrix}^M \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
City Las Vegas	State Zip Code NV 89185		Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribution		011	2300.00
Candidate Name Harry Reid	sbursement For: 2008	Category/ Type	
Office Sought: House Di X Senate President State: NV District: 00	Primary X General Other (specify)		
Full Name (Last, First, Middle Initial) Battle Born PAC			Transaction ID: SB23000000000006
Mailing Address PO Box 370386			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} $
City Las Vegas	State Zip Code NV 89137		Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribution		011	1000.00
Candidate Name Battle Born PAC		Category/ Type	
Office Sought: House Di Senate President State: District:	sbursement For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) Matheson For Congress			Transaction ID: SB23000000000000000000000000000000000000
Mailing Address 677 S 200 W #A			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
City Salt Lake City	State Zip Code UT 84101		Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribution		011	1000.00
Candidate Name James Matheson		Category/ Type	
Office Sought: X House Di Senate President State: UT District: 02	Sbursement For: 2008 Primary X General Other (specify) ▼		
			4300.00

A.

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	I lea canarata conadilla(c)	NE NUMBER:
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name	, , , , , , , , , , , , , , , , , , , ,	' '
NAME OF COMMITTEE (In Full) Varian Medical Systems PAC		
Full Name (Last, First, Middle Initial) Friends For Harry Reid Mailing Address PO Box 85223		Transaction ID: SB2300000000000612727 Date of Disbursement 111
City Las Vegas Purpose of Disbursement Political Contribution	State Zip Code NV 89185	Amount of Each Disbursement this Period 1000.00
Candidate Name Harry Reid	Category/ Type	1
Office Sought: House X Senate President State: NV District: 00	ment For: 2010 Primary X General Other (specify)	

SUBTOTAL of Disbursements This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	<u> </u>	5300.00