07/31/2009 12:28

Image# 29992555100

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Varian Medical Systems PAC 1 1 1 1 1 1212 S Victory Blvd ADDRESS (number and street) Check if different than previously Burbank CA 91502 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00450965 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year Х (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 0 1 2009 06 30 2009 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Kinde Durkee Type or Print Name of Treasurer Electronically Filed by Kinde Durkee 07 29 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2/9

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

Varian Medical Systems PAC D <sup>®</sup>D 0 1 0 1 2009 0.6 3 0 2009 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2009° 9544.67 January 1 (b) Cash on Hand at 9544.67 Begining of Reporting Period ..... 825.00 825.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 10369.67 10369.67 6(a) and 6(c) for Column B) ..... 4993.62 4993.62 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 5376.05 5376.05 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

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

FE6AN026

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 9

Write or Type Committee Name
Varian Medical Systems PAC

Report Covering the Period:

From:

м м 0 1

0 1

<sup>Y</sup> 2009

To.

м м 0 6 <sup>D</sup> 3 0

<sup>Y</sup> 2009

I. Receipts	I. Receipts COLUMN A Total This Period				
Contributions (other than loans) From:     (a) Individuals/Persons Other					
Than Political Committees (i) Itemized (use Schedule A)	500.00	500.00			
(ii) Unitemized	325.00	325.00			
(iii) TOTAL (add Lines 11(a)(i) and (ii)	825.00	825.00			
(b) Political Party Committees	0.00	0.00			
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00			
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	825.00	825.00			
Transfers From Affiliated/Other     Party Committees	0.00	0.00			
3. All Loans Received	0.00	0.00			
Loan Repayments Received     Offsets To Operating Expenditures	0.00				
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00			
to Federal candidates and Other Political Committees		0.00			
7. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00			
. Transfers from Non-Federal and Levin Funds					
(a) Non-Federal Account (from Schedule H3)	0.00	0.00			
(b) Levin Funds (from Schedule H5)	0.00	0.00			
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00			
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	825.00	825.00			
. Total Federal Receipts (subtract Line 18(c) from Line 19)	825.00	825.00			

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003) of Disc

of Disbursements

4/9

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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	0.00	0.00
(b) Other Federal Operating Expenditures	993.62	993.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	993.62	993.62
2. Transfers to Affiliated/Other Party		
Committees	0.00	0.00
3. Contributions to Federal Candidates/Committees and Other Political Committees	4000.00	4000.00
4. Independent Expenditure	0.00	0.00
(use Schedule E)	0.00	0.00
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
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	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
9. Other Disbursements	0.00	0.00
0. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share		3.00
(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
11. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4993.62	4993.62
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	1000.00	4000.00
from Line 31)	4993.62	4993.62

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 9

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)	825.00	825.00			
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00			
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	825.00	825.00			
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	993.62	993.62			
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00			
38. Net Operating Expenditures (subtract Line 37 from Line 36)	993.62	993.62			

FE6AN026

A.

FOR LINE NUMBER: PAGE 6/9 **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) Zane Wilson Date of Receipt Mailing Address 766 Maranello St 16 2009 City State Zip Code Transaction ID: SA11ai00000000625421 Henderson NV 89052 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Varian Medical Systems Inc Occupation Director Receipt For: Aggregate Year-to-Date Primary General 500.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	500.00
TOTAL This Period (last page this line number only)	<b>•</b>	500.00

A.

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N	NUMBER: PAGE 7/9
ITEMIZED DISBURSEMENTS	for each category of the	(check only	one) ] 22
	Detailed Summary Page	27	28a 28b 28c 29 30b
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)			Transaction ID: SB21b000000000643165
Durkee & Associates			Date of Disbursement
Mailing Address 1212 S Victory BI			$\begin{bmatrix} 0 & 2 & M \\ 0 & 2 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 2 & 0 & 0 & 0 \end{bmatrix}$
,	State Zip Code CA 91502		Amount of Each Disbursement this Period
Purpose of Disbursement Accounting	ſ	001	750.00
Candidate Name	,	Category/ Type	
Senate President	ment For: Primary General Other (specify)	71-1	
State: District:			
Full Name (Last, First, Middle Initial) Durkee & Associates			Transaction ID: SB21b000000000643168 Date of Disbursement
Mailing Address 1212 S Victory BI			$\begin{bmatrix} 0 & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 4 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 2 & 0 & 0 & 9 \end{bmatrix}$
•	State Zip Code CA 91502		Amount of Each Disbursement this Period
Purpose of Disbursement Accounting	1	001	18.80
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Durkee & Associates			Transaction ID: SB21b000000000643171 Date of Disbursement
Mailing Address 1212 S Victory BI			$\begin{bmatrix} 0 & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} 0 & 3 & 1 \\ 0 & 3 & 1 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 1 \\ 0 & 2 & 0 & 0 & 9 \end{bmatrix}$
	State Zip Code CA 91502		Amount of Each Disbursement this Period
Purpose of Disbursement Accounting	Ī	001	164.70
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	. 772	
State: District:	(-p>)/ <b>\</b>		
SUBTOTAL of Disbursements This Page (optional) .			933.50

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

State:

A.

District:

SCHEDULE B TEMIZED DIS		•	for each	arate schedule category of the Summary Page	Ì		R LIN neck or 21b 27			R:	23 28b		24 28c	GE 8	5	26 30b	
Any Information copied or for commercial purp																_	
NAME OF COMM Varian Medical	` ,																
Full Name (Last, F Durkee & Associ Mailing Address		Bl						- 1	Date o		sburs	_	_	00000 Ž 0	ý 9 <sup>°</sup>	6509	<b>-</b> 68
City Burbank Purpose of Disbur	sement		State CA	Zip Code 91502	T_				Amou	int of	f Each	Dis	burser	ment th	nis Per	iod	
Accounting Candidate Name					_ C	00 ateg Typ	ory/			^			<u> </u>	<u> </u>			
Office Sought:	House Senate President	Disburse	ment For: Primary Other (spe	☐ Genera	al												

SUBTOTAL of Disbursements This Page (optional)	•	60.12
TOTAL This Period (last page this line number only)	<u> </u>	993.62

Washington  Purpose of Disbursement Political Contribution  Candidate Name Harry Reid  Office Sought: House	e and address o	mmary Page e sold or used		22 X 23 28b 20 2 28b 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	3230000000000643
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 426 C St NE  City Washington Purpose of Disbursement Political Contribution Candidate Name Harry Reid  Office Sought: House X Senate President State: NV District: 00  Full Name (Last, First, Middle Initial) Friends For Harry Reid  Mailing Address 426 C St NE  City Washington Purpose of Disbursement Political Contribution Candidate Name	e and address o	of any political of		Transaction ID: SE	3230000000000643
Varian Medical Systems PAC  Full Name (Last, First, Middle Initial) Friends For Harry Reid  Mailing Address 426 C St NE  City Washington Purpose of Disbursement Political Contribution Candidate Name Harry Reid  Office Sought: House X Senate President State: NV District: 00  Full Name (Last, First, Middle Initial) Friends For Harry Reid  Mailing Address 426 C St NE  City Washington Purpose of Disbursement Political Contribution Candidate Name				Date of Disbursement	t
Friends For Harry Reid  Mailing Address 426 C St NE  City Washington Purpose of Disbursement Political Contribution Candidate Name Harry Reid  Office Sought: House X Senate President State: NV District: 00  Full Name (Last, First, Middle Initial) Friends For Harry Reid  Mailing Address 426 C St NE  City Washington Purpose of Disbursement Political Contribution Candidate Name				Date of Disbursement	t
City Washington Purpose of Disbursement Political Contribution Candidate Name Harry Reid Office Sought:  House X Senate President State: NV District: 00  Full Name (Last, First, Middle Initial) Friends For Harry Reid  Mailing Address 426 C St NE  City Washington Purpose of Disbursement Political Contribution Candidate Name				$\begin{bmatrix} 0 & 4 & M & 1 & 1 & 2 & 9 \end{bmatrix}$	/ Y Y Y Y Y
Washington Purpose of Disbursement Political Contribution Candidate Name Harry Reid Office Sought: House X Senate President State: NV District: 00 Full Name (Last, First, Middle Initial) Friends For Harry Reid Mailing Address 426 C St NE  City Washington Purpose of Disbursement Political Contribution Candidate Name					2009
Political Contribution  Candidate Name Harry Reid  Office Sought: House				Amount of Each Disb	
Harry Reid  Office Sought:  X Senate President State: NV District: 00  Full Name (Last, First, Middle Initial) Friends For Harry Reid  Mailing Address 426 C St NE  City Washington Purpose of Disbursement Political Contribution Candidate Name			011		1000.00
X Senate President State: NV District: 00  Full Name (Last, First, Middle Initial) Friends For Harry Reid  Mailing Address 426 C St NE  City Washington Purpose of Disbursement Political Contribution Candidate Name			Category/ Type		
Full Name (Last, First, Middle Initial) Friends For Harry Reid  Mailing Address 426 C St NE  City Washington Purpose of Disbursement Political Contribution Candidate Name	ment For: Primary Other (specify	General  /) ▼			
City Washington Purpose of Disbursement Political Contribution Candidate Name				Transaction ID: SE	3230000000000643 t
Washington Purpose of Disbursement Political Contribution Candidate Name				05 / 22	2009
Political Contribution  Candidate Name		ip Code 20002		Amount of Each Disb	ursement this Period
			011		500.00
,			Category/ Type		
Office Sought:    House   Disburse     X   Senate     President     State: NV   District: 00	ment For: Primary Other (specify	General			
Full Name (Last, First, Middle Initial)  New Democrat Coalition Political Action Co	ommittee AK	A		Transaction ID: SE	3230000000000650 t
NDC PAC Mailing Address 607 14th St NW				06 / 05	2009
		ip Code 20005		Amount of Each Disb	
Purpose of Disbursement Monetary Contribution			011		2500.00
Candidate Name  New Democrat Coalition Political Action Co  AKA NDC PAC  Office Sought: House Disburse			Category/ Type		
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (specify	General			
<u>'</u>					4000.00
TOTAL This Period (last page this line number only)			<u></u>		4000.00