



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Varian Medical Systems, Inc. PAC ('Varian PAC')

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="6940.15"/>	<input type="text" value="6940.15"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="12460.15"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="2012.00"/>	<input type="text" value="14532.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="14472.15"/>	<input type="text" value="21472.15"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8500.00"/>	<input type="text" value="15500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5972.15"/>	<input type="text" value="5972.15"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

Varian Medical Systems, Inc. PAC ('Varian PAC')

Report Covering the Period: From:  /  /  To:  /  /

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).....	1420.00	8515.00
(ii) Unitemized .....	592.00	6017.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2012.00	14532.00
(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) .....	2012.00	14532.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total 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))..... ▶	2012.00	14532.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2012.00	14532.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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.....	8500.00	15500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	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 .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	8500.00	15500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8500.00	15500.00

**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) .....	2012.00	14532.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2012.00	14532.00
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 11
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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)  
**Varian Medical Systems, Inc. PAC ('Varian PAC')**

Full Name (Last, First, Middle Initial) <b>A. Suzette Ray</b>		Date of Receipt
Mailing Address 1525 Grant Street		<input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City	State	Zip Code
San Mateo	CA	94402-2103
FEC ID number of contributing federal political committee.		<b>Transaction ID : 47631917</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Varian Medical Systems	District Manager	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Keith Askoff</b>		Date of Receipt
Mailing Address 324 Mercy St. 26th Floor		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Mountain View	CA	94041
FEC ID number of contributing federal political committee.		<b>Transaction ID : PR1833140624991</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="40.00"/>
Name of Employer	Occupation	
Varian Medical Systems	VAR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="340.00"/>	
<input type="checkbox"/> Other (specify) ▼		

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. Robert Drubka</b>		Date of Receipt
Mailing Address 5250 S Rainbow Bl #1145		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Las Vegas	NV	89118
FEC ID number of contributing federal political committee.		<b>Transaction ID : PR1980198524991</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
Varian Medical Systems	VAR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="850.00"/>	
<input type="checkbox"/> Other (specify) ▼		

P/R Deduction (\$50.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="390.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 7 OF 11
<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)  
**Varian Medical Systems, Inc. PAC ('Varian PAC')**

**A. Jon Hollon**  
Full Name (Last, First, Middle Initial)  
Mailing Address 322 Karen Av #3006  
City Las Vegas State NV Zip Code 89106  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Varian Medical Systems Occupation VAR  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 31 / 2012  
**Transaction ID : PR1980199124991**  
Amount of Each Receipt this Period 100.00  
P/R Deduction (\$50.00 Bi-Weekly)

**B. Ching Clifton Ling**  
Full Name (Last, First, Middle Initial)  
Mailing Address 345 E 69th Street, PH E  
City New York State NY Zip Code 10021-5595  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Varian Medical Systems Occupation VAR  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 31 / 2012  
**Transaction ID : PR1980199624991**  
Amount of Each Receipt this Period 100.00  
P/R Deduction (\$50.00 Bi-Weekly)

**C. David Nisius**  
Full Name (Last, First, Middle Initial)  
Mailing Address 315 Statford Rd  
City Des Plaines State IL Zip Code 60016  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Varian Medical Systems Occupation VAR  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 08 / 31 / 2012  
**Transaction ID : PR1980199824991**  
Amount of Each Receipt this Period 200.00  
P/R Deduction (\$100.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 8 OF 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Varian Medical Systems, Inc. PAC ('Varian PAC')**

**A. Stacy Stordahl**  
Full Name (Last, First, Middle Initial)

Mailing Address 2611 Ross Rd

City Chevy Chase State MD Zip Code 20815-3834

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

Name of Employer Varian Medical Systems Occupation VAR

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 / 31 / 2012**

**Transaction ID : PR1980200624991**

Amount of Each Receipt this Period  
**40.00**

P/R Deduction (\$20.00 Bi-Weekly)

**B. Tracy Ting**  
Full Name (Last, First, Middle Initial)

Mailing Address 10954 Stevens Canyon Rd

City Cupertino State CA Zip Code 95014-3944

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

Name of Employer Varian Medical Systems Occupation VAR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1700.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : PR1980200824991**

Amount of Each Receipt this Period  
**200.00**

P/R Deduction (\$100.00 Bi-Weekly)

**C. Maureen Tracy**  
Full Name (Last, First, Middle Initial)

Mailing Address 520 N Charter Street

City Monticello State IL Zip Code 61856

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

Name of Employer Varian Medical Systems Occupation VAR

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 / 31 / 2012**

**Transaction ID : PR1980200924991**

Amount of Each Receipt this Period  
**100.00**

P/R Deduction (\$50.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>340.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Varian Medical Systems, Inc. PAC ('Varian PAC')**

**A. Andrew Whitman**  
Full Name (Last, First, Middle Initial)

Mailing Address 704 Hatherleigh Rd

City Baltimore State MD Zip Code 21212

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

Name of Employer Varian Medical Systems Occupation VAR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2125.00

Date of Receipt 08 / 31 / 2012  
Transaction ID : PR1980201224991

Amount of Each Receipt this Period 250.00

P/R Deduction (\$125.00 Bi-Weekly)

**B. Tammy Wotring**  
Full Name (Last, First, Middle Initial)

Mailing Address 115 Carrisk Court

City Tyrone State GA Zip Code 30290

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

Name of Employer Varian Medical Systems Occupation VAR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 31 / 2012  
Transaction ID : PR1980201524991

Amount of Each Receipt this Period 40.00

P/R Deduction (\$20.00 Bi-Weekly)

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	290.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1420.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Varian Medical Systems, Inc. PAC ('Varian PAC')**

Full Name (Last, First, Middle Initial)

**A. Searchlight Leadership Fund**

Mailing Address 422 C Street, NE  
Lower Level

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution: Searchlight Leadership Fund

011

Candidate Name

**Searchlight Leadership Fund**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 28 / 2012

**Transaction ID : 47631918**

Amount of Each Disbursement this Period

2500.00

Contribution: Searchlight Leadership Fund

Full Name (Last, First, Middle Initial)

**B. Montana Democratic Party - Federal Account**

Mailing Address P.O. Box 802

City Helena State MT Zip Code 59624

Purpose of Disbursement  
Contribution: Montana Democratic Party - Fed Acct

011

Candidate Name

**Montana Democratic Party - Federal Account**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2012

**Transaction ID : 47631920**

Amount of Each Disbursement this Period

2500.00

Contribution: Montana Democratic Party - Fed Acct

Full Name (Last, First, Middle Initial)

**C. Matheson For Congress**

Mailing Address P O Box 521048

City Salt Lake City State UT Zip Code 84152

Purpose of Disbursement  
Contribution: James Matheson (D-2nd UT)

011

Candidate Name

**Rep. James D. Matheson**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: UT District: 02

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 15 / 2012

**Transaction ID : 47631921**

Amount of Each Disbursement this Period

1000.00

Contribution: James Matheson (D-2nd UT)

**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 Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Varian Medical Systems, Inc. PAC ('Varian PAC')**

Full Name (Last, First, Middle Initial)

**A. Glacier PAC**

Mailing Address 818 Connecticut Ave. NW #1009  
Suite 1009

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Contribution: Glacier PAC

Candidate Name  
**Glacier PAC**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
08 / 28 / 2012

**Transaction ID : 47631922**

Amount of Each Disbursement this Period  
2500.00

Contribution: Glacier PAC

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement  
MM / DD / YYYY

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement  
MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

2500.00  
8500.00