

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="2022"/>		13197.13
(b) Cash on Hand at Beginning of Reporting Period.....	4642.06	
(c) Total Receipts (from Line 19)	2987.40	23958.40
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	7629.46	37155.53
7. Total Disbursements (from Line 31).....	2500.00	32026.07
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	5129.46	5129.46
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

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).....	2736.90	17482.90
(ii) Unitemized	250.50	6475.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2987.40	23958.40
(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)	2987.40	23958.40
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)).....▶	2987.40	23958.40
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2987.40	23958.40

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	66.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	66.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	31500.00
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	460.00
(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	460.00
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)) ..	2500.00	32026.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2500.00	32026.07

DETAILED SUMMARY PAGE
of Disbursements

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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)	2987.40	23958.40
34. Total Contribution Refunds (from Line 28(d))	0.00	460.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2987.40	23498.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	66.07
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	66.07

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
<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)
Varian Medical Systems, Inc. PAC ('Varian PAC')

A. Deluca, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 Oconnor St
 City Menlo Park State CA Zip Code 94025-2663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Accountant V
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1110.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR1980198485173
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Ling, Clifton, Clifton, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 345 E 69th Street PHE
 City New York State NY Zip Code 10021-5595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Advanced Clin Rsrch Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR1980199685173
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Patzer, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 424 3rd Lane South
 City Kirkland State WA Zip Code 98033-6610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Sr Mgr, Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR1980200185173
 Amount of Each Receipt this Period 75.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	255.00
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 7 OF 14
	<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. Tracy, Mo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1122 N State Street
 City Monticello State IL Zip Code 61856-1152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Executive Director, Access to Cancer C
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1875.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR1980200985173
 Amount of Each Receipt this Period 375.00
 Memo Item
 P/R Deduction (\$125.00 Bi-Weekly)

B. Whitman, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 704 Hatherleigh Rd
 City Baltimore State MD Zip Code 21212-1613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Vice President, Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4422.90

Date of Receipt 11 / 28 / 2022
Transaction ID : PR1980201285173
 Amount of Each Receipt this Period 576.90
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

C. Kowal, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1905 Big Bend Cove
 City Southlake State TX Zip Code 76092-6933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) VP, Domestic Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2016511185173
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	1101.90
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 14
<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. Tran, Vy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 906 Golden Way
 City Los Altos State CA Zip Code 94024-5056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) SVP, Regulatory Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2021050385173
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

B. Ryberg, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5410 Greenfield Way
 City Pleasanton State CA Zip Code 94566-5416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) VP, Global Supply Chain
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2022644285173
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

C. Khuntia, Deepak, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1358 Country Club Drive
 City Los Altos State CA Zip Code 94024-5302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Vp Medical Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2362779685173
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	180.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 14
<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. Wall, Kathryn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9805 Withers Road
 City Charlotte State NC Zip Code 28278-6821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Sr Mgr, Professional Svc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2362780185173
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Cook, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 Westwood Ave.
 City Alliance State OH Zip Code 44601-5743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Mgr II, Field Service
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2485129085173
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Kattmann, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7444 Plank Road
 City Afton State VA Zip Code 22920-1807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Director, Prog/Proj Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2485129285173
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

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 10 OF 14
	<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. Toth, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1252 Coolidge Ave
 City San Jose State CA Zip Code 95125-3226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) SVP, Regional Leader (AMER)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2485129385173
 Amount of Each Receipt this Period 300.00
 Memo Item
 P/R Deduction (\$100.00 Bi-Weekly)

B. Jackson, Ted, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2142 Oak Forest Dr
 City Ellicott City State MD Zip Code 21043-1966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Director, Product Mktg
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2485129585173
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Akbany, Adam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2256 Cardinal Blvd.
 City Carrollton State TX Zip Code 75010-4913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Director Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2498164985173
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	390.00
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 11 OF 14
<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. Brooks, Jason, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1813 Woodland Street
 City Nashville State TN Zip Code 37206-1947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Sr Mgr Field Service
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2498165085173
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Buzzutto, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 224 Stillcreek Drive
 City Franklin State TN Zip Code 37064-6764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Mgr II Field Service
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2498165185173
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Earwicker, Adam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1614 Towell Lane
 City Escondido State CA Zip Code 92029-3110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Dir Strtgc Bus Devel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2498165485173
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

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 12 OF 14
	<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. Konzem, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6233 Solomon Ct
 City San Jose State CA Zip Code 95123-5616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Sr Mgr CSS Project Mgt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2498165985173
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. McElvaney, Ann, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2839 Sarles Drive
 City Yorktown Heights State NY Zip Code 10598-3322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Mgr II Clinical Trng Spec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2498166085173
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Snyder, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 Hunters Mill Ln Woodstock
 City Woodstock State GA Zip Code 30188-3026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Sr Mgr Installations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2498166285173
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	210.00
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 13 OF 14
<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. Gong, Cynthia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1317 Carrie Lee Way
 City San Jose State CA Zip Code 95118-1404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) HW Verification Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2622508185173
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Foster, Stephanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1833 W Periwinkle Way
 City Chandler State AZ Zip Code 85248-4263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) VP, Revenue & Operations Strategy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2622508685173
 Amount of Each Receipt this Period 300.00
 Memo Item
 P/R Deduction (\$100.00 Bi-Weekly)

C. McEvoy, Tommy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3828 Broadview Dr
 City Cincinnati State OH Zip Code 45208-1948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Director of Strategic Software Solutio
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 11 / 28 / 2022
Transaction ID : PR2622508885173
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	390.00
TOTAL This Period (last page this line number only).....	2736.90

**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"/> 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')

A. Crapo Victory Committee

Full Name (Last, First, Middle Initial)

Mailing Address 228 S. Washington St
Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution: Crapo Victory Committee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y
10 / 20 / 2022

FEC Identification Number: C []
Transaction ID : 86421894

Amount of Each Disbursement this Period: [] 2500.00

Memo Item Contribution: Crapo Victory Committee

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) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y

FEC Identification Number: C []

Amount of Each Disbursement this Period: []

Memo Item

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) ▼

Date of Disbursement: M M / 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).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	2500.00