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 over the	e: If typing, type lines.	12FE4M	15	
Varian Medical System	ns, Inc. PAC ('Va	rian PAC')				
ADDRESS (number and street)	801 Pennsylvania Ave	enue, NW				
Check if different than previously reported. (ACC)	Suite 730				20004 —	
2. FEC IDENTIFICATION N	UMBER V	CITY ▲		STATE 🔺	ZIP COD)E 🔺
C C00450965		3. IS THIS REPORT	× NEW (N) OI		/ENDED)	
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (C July 15 Quarterly Report (C October 15 Quarterly Report (C January 31 Year-End Report (Non-electio Year Only) (MY) 	(C) 12-Day PRE-Electic Report for t Q3) YE) (d) 30-Day	on the: Con Election on tion x Gen	May 20 (M Jun 20 (M Jul 20 (M7 hary (12P) vention (12C)	6) Sep	20 (M9) 20 (M10) 20 (M10) 12G) 12G) 112G) 112G) 112G) 112G	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
Termination Report (TER)	t l	M	11 / D D 08	/ Y Y Y Y 2016	in the State of	
5. Covering Period		2016 th	nrough 11	M / D D / 28	Y Y Y Y 2016	
I certify that I have examined the Type or Print Name of Treasure Signature of Treasurer	Tracy, Zilly, , Maureer er y, Zilly, , Maureen,	n, [Elec	ctronically Filed]	Date 12	/ D D / 08	2016 U.S.C. § 30109
Office Use Only					FEC FORI Rev. 05/20	

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X

Γ	FEC Form 3X (Rev. 05/2016)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
W	rite or Type Committee Name		
١	/arian Medical Systems, Inc. PA	C ('Varian PAC')	
R	eport Covering the Period: From:	10 / 20 / 2016 To:	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		4205.59
	(b) Cash on Hand at Beginning of Reporting Period	3323.64	
	(c) Total Receipts (from Line 19)	7651.00	54230.50
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	10974.64	58436.09
7.	Total Disbursements (from Line 31)	127.88	47589.33
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10846.76	10846.76
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

Page 3

54230.50

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Varian Medical Systems, Inc. PAC ('Varian PAC') MM DD 10 20 2016 11 28 2016 Report Covering the Period: From: To: COLUMN A COLUMN B I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 6990.00 42735.00 (i) Itemized (use Schedule A)..... 11495.50 661.00 (ii) Unitemized (iii) TOTAL (add 54230.50 7651.00 Lines 11(a)(i) and (ii)..... 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 54230.50 7651.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) (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))...... 7651.00 54230.50

7651.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).......►

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4				
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
. 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	127.88	589.33				
(c) Total Operating Expenditures	407.00	589.33				
(add 21(a)(i), (a)(ii), and (b))	127.88					
Committees Contributions to	0.00	0.00				
Federal Candidates/Committees and Other Political Committees	0.00	47000.00				
Independent Expenditures (use Schedule E)	0.00	0.00				
Coordinated Party Expenditures (52 U.S.C. § 30116(d))						
(use Schedule F)	0.00	0.00				
Loan Repayments Made	0.00	0.00				
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(c) Other Political Committees	0.00	0.00				
(such as PACs)	0.00	0.00				
(d) Total Contribution Refunds(add Lines 28(a), (b), and (c))	0.00	0.00				
Othern Diskumsersonte (Inskudian	45 45					
Other Disbursements (Including Non-Federal Donations)	0.00	0.00				
Federal Election Activity (52 U.S.C. § 30101(2	0))					
(a) Allocated Federal Election Activity						
(from Schedule H6) (i) Federal Share	0.00	0.00				
(ii) "Levin" Share						
(ii) Levin Share (b) Federal Election Activity Paid	0.00	0.00				
Entirely With Federal Funds	0.00	0.00				
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00				
Total Disbursements (add Lines 21(c), 22,						
23, 24, 25, 26, 27, 28(d), 29 and 30(c)).	127.88	47589.33				
Total Federal Disbursements						
(subtract Line 21(a)(ii) and Line 30(a)(ii)						
from Line 31)	127.88	47589.33				

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DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	7651.00	54230.50
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7651.00	54230.50
 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	127.88	589.33
 Offsets to Operating Expenditures (from Line 15, page 3) 	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	127.88	589.33

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and Stat for commercial purposes, other than using the n								
	NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc. PA	C ('Vari	an PAC')						
Α.	Full Name of Individual (Last, First, Middle Initial Bruner, Judy, , , Mailing Address 14072 Okanogan Drive	l) or Full C	Organization Name	Date of Receipt					
	City	State	Zip Code	10 28 2016 Transaction ID : 74526909					
	Saratoga	CA	95070-5532	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		2500.00					
	Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) ector	Memo Item					
		Aggregate	Year-to-Date 🔻						
	Other (specify)		2500.00						
В.	Full Name of Individual (Last, First, Middle Initia Biscotti, Larry, , ,	l) or Full C	Organization Name	Date of Receipt					
	Mailing Address 871 South Soda Creek Road			11 / D D / Y Y Y Y Y 2016					
	City	State CO	Zip Code	Transaction ID : 74526913					
	Evergreen		80439-9606	_ Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		400.00					
	Name of Employer (for Individual) Varian Medical Systems		cupation (for Individual) ector Sales	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00						
с.	Full Name of Individual (Last, First, Middle Initia Melms, Pamela, , ,	l) or Full C	Organization Name	Date of Receipt					
	Mailing Address 2532 163rd TER E			11 / D D / Y Y Y Y Y 11 04 2016					
	City Parrish	State FL	Zip Code 34219-1813	Transaction ID : 74526915 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С							
	Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) duct Specialist III	Memo Item					
	Receipt For: Primary General Other (specify)	Primary General Aggregate Teal-to-Date V							
s	UBTOTAL of Receipts This Page (optional)		•	3150.00					
т	OTAL This Period (last page this line number on	ly)	•••••						

Use separate schedule(s) for each category of the

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17			
	y information copied from such Reports and Stat for commercial purposes, other than using the n						
	NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc. PA	C ('Vari	an PAC')				
Α.	Full Name of Individual (Last, First, Middle Initia Young, Brian, , , Mailing Address 6268 South Elmira Circle E	l) or Full C	Organization Name	Date of Receipt			
	City	State	Zip Code	11 14 2016 Transaction ID : 74526918			
	Englewood	СО	80111-5606	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		300.00			
	Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) es Representative IV	Memo Item			
	Receipt For: Primary General Other (specify) ▼						
в.	Full Name of Individual (Last, First, Middle Initial Askoff, Keith, , ,	l) or Full C	Organization Name	Date of Receipt			
	Mailing Address 324 Mercy St.	11 / D D / Y Y Y Y 2016					
	City Mountain View	State CA	Zip Code 94041-2204	Transaction ID : PR1833140651299 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		60.00			
	Name of Employer (for Individual) Varian Medical Systems		cupation (for Individual) , Associate General Counsel	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-Weekly)			
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Bisciotti, David, , ,	l) or Full C	Organization Name	Date of Receipt			
	Mailing Address 110 Providence Lake Point	-		11 / D D / Y Y Y Y 11 28 2016			
	City Milton	State GA	Zip Code 30004-3481	Transaction ID : PR1980198151299			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
	Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) Customer Service	Memo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)			
s	UBTOTAL of Receipts This Page (optional)		•	390.00			
т	OTAL This Period (last page this line number on	ly)	•••••				

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	y information copied from such Reports and Stat for commercial purposes, other than using the n														
	NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc. PA	C ('Varia	an	PAC')											
Α.		l) or Full O	Drga	nization Name		Date of Receipt									
	Mailing Address 11714 Littler Rd	State		Zip Code		[™] 11		1	28	Ľ	201	-	Y		
	Sandy	UT		84092-5762						PR1980)		
	FEC ID number of contributing federal political committee.	С								eceipt th		30.0	0		
	Name of Employer (for Individual) Varian Medical Systems		tion (for Individual) ager			Men	no It	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	ar-to-Date ▼ 240.00	F	P/R D	educ	ction	(\$10.	00 Bi-W	eekly)					
в.	Full Name of Individual (Last, First, Middle Initial Cichocki, Gayle, , ,	l) or Full O	Drga	nization Name		Date	of F	Rece	eipt						
	Mailing Address 386 Chadwick Cir City State Zip Code							11 28 2016							
	City Henderson	State NV						PR1980 [.] eceipt th			1				
	FEC ID number of contributing federal political committee.	C						,				30.0	0		
	Name of Employer (for Individual) Varian Medical Systems		•	ation (for Individual) al Tech Supply Specialst		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00						tion	(\$10.	00 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Initial Deluca, Catherine, , ,	l) or Full O	Drga	nization Name		Date	of F	Rece	eipt						
	Mailing Address 304 Oconnor St					M 1	I	/	D D D 28		201		Y		
	City Menlo Park	State CA		Zip Code 94025-2663						PR1980)		
	FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period									
	Name of Employer (for Individual) Varian Medical Systems		tion (for Individual) tant V			Men	no li	tem							
	Peopint For:	Aggregate Year-to-Date ▼ 1200.00						ction	(\$50.	.00 Bi-W	eekly)				
s	UBTOTAL of Receipts This Page (optional)			•••••				,			2	10.0	0		
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	y information copied from such Reports and State for commercial purposes, other than using the nar															
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc. PAC	('Varia	n PAC')													
A.	Full Name of Individual (Last, First, Middle Initial) Drubka, Robert, , ,	ganization Name			Date	of	Re	ceipt								
	Mailing Address 5250 S Rainbow Bl #1145 City	State Zip Code							11 / 28 / 2016 Transaction ID : PR1980198551299							
	Las Vegas	NV	89118-0630		Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	C				Ē			.			150.0	00			
	Name of Employer (for Individual) Varian Medical Systems		pation (for Individua eral Manager	al)			Me	emo	Item							
	Receipt For: A Primary General Other (specify) ▼	ggregate `	/ear-to-Date ▼	1200.00	F	P/R C	edu	uctio	on (\$50	.00 Bi-W	'eekl	у)				
B.	Full Name of Individual (Last, First, Middle Initial) Emmons, Anna, , ,	or Full Or	ganization Name			Date	of	Re	ceipt							
	Mailing Address 24 Aliso Wy		11 28 / Y Y Y Y 2016													
	City Menlo Park	State Zip Code CA 94028-7527								PR1980 Receipt t)			
	FEC ID number of contributing federal political committee.	C	30.00													
	Name of Employer (for Individual) Varian Medical Systems	Occupation (for Individual) VP, Division HR							Memo Item							
	Receipt For: A Primary General Other (specify) ▼	ggregate `	/ear-to-Date ▼	240.00	F	9/R D	edu	ictic	on (\$10.	.00 Bi-W	eekly	y)				
C.	Full Name of Individual (Last, First, Middle Initial) Gemperline, Robert, , ,	or Full Or	ganization Name			Date	of	Re	ceipt							
	Mailing Address 710 Chestnut Ct					M 1	1	/	28	_ L	20	016 [°]				
	City Algonquin	State IL	Zip Code 60102-2118							PR1980 Receipt t			9			
	FEC ID number of contributing federal political committee.					unit		J			30.0	00				
	Name of Employer (for Individual) Varian Medical Systems	Occupation (for Individual) SW Engineer IV							Item							
	Receipt For: A Primary General Other (specify) I	ggregate `	/ear-to-Date ▼	240.00	F	P/R [edu	uctio	on (\$10	.00 Bi-W	'eekl	y)				
s	UBTOTAL of Receipts This Page (optional)				-				,	, ,		210.0	00			
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			Detailed Summary Page	×	11a		11b		11c	12				
					13		14		15	16	17			
	y information copied from such Reports and Stateme for commercial purposes, other than using the name													
\rangle	NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc. PAC (
A.	Full Name of Individual (Last, First, Middle Initial) or Hurlock, David, , ,	[Date of Receipt											
	Mailing Address 2045 Ashburton Way				м м 11	/	D 28		/ Y	y y 2016	Y			
	,	tate SC	Zip Code 29466-6877		Transaction ID : PR1980199251299 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	;			_				-y	30.0				
	Name of Employer (for Individual) Varian Medical Systems		ation (for Individual) ger, Sales		Me	emo	Item							
	Receipt For: Agg Primary General Other (specify) ▼	gregate Ye	ear-to-Date ▼ 240.00	P	'R Dedi	uctio	on (\$1	0.0	0 Bi-We	ekly)				
B.	Full Name of Individual (Last, First, Middle Initial) or Jackson, Theodore, , ,	anization Name	[Date of	Re	ceipt								
	Mailing Address 2142 Oak Forest Dr			11 / 28 / Y Y Y Y Y 2016										
	2	tate /ID							9935129 s Period)				
	FEC ID number of contributing federal political committee.	C							30.00					
	Name of Employer (for Individual) Varian Medical Systems								Memo Item					
	Receipt For: Agg Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00						0.0	0 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Initial) or June, Stacy, , ,	r Full Orga	anization Name		Date of	Re	ceipt							
	Mailing Address 174 Mosby Woods Dr				м м 11	1	2		/ Y	y y 2016	Y			
	,	tate GA	Zip Code 30265-2212	A						9945129 s Period	9			
	FEC ID number of contributing federal political committee.	;					,		g	30.0	00			
	Name of Employer (for Individual) Varian Medical Systems Receipt For:	Occupa Mgr III,		M	ema	ltem								
	Primary General Age Other (specify)	gregate Ye	P/R Deduction (\$10.00 Bi-Weekly)											
s	UBTOTAL of Receipts This Page (optional)		••••••				, .		,	90.0	0			
т	OTAL This Period (last page this line number only)													

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
or	y information copied from such Reports and Stat for commercial purposes, other than using the na									
\rangle	NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc. PAC									
Α.	Full Name of Individual (Last, First, Middle Initial Kaye, Mark, , ,) or Full O	rganization Name	Date of Receipt						
	Mailing Address 1830 High Trail			11 / D D / Y Y Y Y Y 2016						
	City Atlanta	State GA	Zip Code 30339-8470	Transaction ID : PR1980199551299						
	FEC ID number of contributing federal political committee.	C	30339-0410	Amount of Each Receipt this Period						
	Name of Employer (for Individual)		upation (for Individual)	Memo Item						
	Varian Medical Systems Receipt For:		Igr, Sales							
	Primary General Other (specify) ▼	Primary General Aggregate Teal-to-Date V								
в.	Full Name of Individual (Last, First, Middle Initial Ling, Ching Clifton, , ,	Date of Receipt								
	Mailing Address 345 E 69th Street PH E	11 / D D / Y Y Y Y 2016								
	City	State	Zip Code	Transaction ID : PR1980199651299						
	New York	NY	10021-5595	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	30.00								
	Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) anced Clin Rsrch Dir	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initial Mansfield, Stanley, , ,) or Full O	rganization Name	Date of Receipt						
	Mailing Address 1137 S Bernardo Ave			11 / D D / Y Y Y Y 2016						
	City Sunnyvale	State CA	Zip Code	Transaction ID : PR1980199751299						
	Sunnyvale		94087-2057	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		30.00						
	Name of Employer (for Individual)	Occu	upation (for Individual)	Memo Item						
	Varian Medical Systems	Sr M	lanager, Research Science							
		Aggregate	Year-to-Date 🔻							
	Other (specify)		240.00	P/R Deduction (\$10.00 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			90.00						
т	OTAL This Period (last page this line number on	ly)	•							

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and State for commercial purposes, other than using the na								
\rangle	Varian Medical Systems, Inc. PAC	C ('Varia	an PAC')						
Α.	Full Name of Individual (Last, First, Middle Initial) Nisius, David, , ,	or Full Or	ganization Name	Date of Receipt					
	Mailing Address 315 Statford Rd	Otata	Zin Onde	11 28 2016					
	City Des Plaines	State IL	Zip Code 60016-2109	Transaction ID : PR1980199851299					
		С		Amount of Each Receipt this Period					
	Name of Employer (for Individual) Varian Medical Systems		pation (for Individual) neer Manager	Memo Item					
	Receipt For: A Primary General Other (specify) ▼								
в.	Full Name of Individual (Last, First, Middle Initial) O'Byrne, Mary, , ,	Date of Receipt							
	Mailing Address 290 Live Oak Ln	11 28 2016							
	City	State	Zip Code	Transaction ID : PR1980199951299					
	Los Altos	CA	94022-2175	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	30.00							
	Name of Employer (for Individual) Varian Medical Systems		pation (for Individual) Associate General Counsel	Memo Item					
	Receipt For: A Primary General Other (specify) ▼	vggregate `	Year-to-Date ▼ 340.00	P/R Deduction (\$10.00 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initial) Palter, Alan, , ,	or Full Or	ganization Name	Date of Receipt					
	Mailing Address 2035 Queens Lane			11 / D D / Y Y Y Y 2016					
	City	State CA	Zip Code	Transaction ID : PR1980200051299					
	San Mateo	CA	94402-3930	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		30.00					
	Name of Employer (for Individual) Varian Medical Systems		pation (for Individual) or Director	Memo Item					
	Poppint For:	Aggregate \	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			210.00					
т	OTAL This Period (last page this line number only	/)	·····						

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
or for commercial purposes, other than using			erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc	: PAC ('Vari	an PAC')						
Full Name of Individual (Last, First, Midd A. Patzer, Mark, , ,	le Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 424 3rd Lane South			11 28 2016					
City	State WA	Zip Code	Transaction ID : PR1980200151299					
Kirkland	VVA	98033-6610	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		75.00					
Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) Agr, Sales	Memo Item					
Receipt For:		Year-to-Date ▼						
Primary General Other (specify) ▼		600.00	P/R Deduction (\$25.00 Bi-Weekly)					
Full Name of Individual (Last, First, Midd B. Petrillo, Michael, , ,	le Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 7910 Boothill Drive			11 28 2016					
City	State	Zip Code	Transaction ID : PR1980200251299					
Park City	UT	84098-5394	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.00					
Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) Manager	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middl C. Shue, Jeff, , ,	le Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 2721 NW 78th St			11 28 2016					
City	State	Zip Code	Transaction ID : PR1980200551299					
Topeka	KS	66618-2107	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		45.00					
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
Varian Medical Systems		duct Spt Engineer IV						
Receipt For:	Aggregate	Year-to-Date V						
Other (specify)		355.00	P/R Deduction (\$15.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optiona	al)		150.00					
TOTAL This Period (last page this line nun								

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and State for commercial purposes, other than using the na			
	NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc. PAC	C ('Vari	ian PAC')	
Α.	Full Name of Individual (Last, First, Middle Initial) Stordahl, Stacy, , , Mailing Address 2611 Ross Rd) or Full C	Drganization Name	Date of Receipt
	City Chevy Chase	State MD	Zip Code 20815-3834	Transaction ID : PR1980200651299 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		75.00
	Name of Employer (for Individual) Varian Medical Systems Receipt For: Primary General Other (specify) ▼	Sr [cupation (for Individual) Dir, Reimb/Hlth Policy	P/R Deduction (\$25.00 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initial) Tracy, Maureen, , , Mailing Address 520 N Charter Street) or Full C	Drganization Name	Date of Receipt
	City Monticello FEC ID number of contributing federal political committee.	State IL	Zip Code 61856-1170	Transaction ID : PR1980200951299 Amount of Each Receipt this Period 40.00 Memo Item
	Name of Employer (for Individual) Varian Medical Systems Receipt For: Primary General Other (specify) ▼	Gov	cupation (for Individual) overnment Affairs Advisor	P/R Deduction (\$20.00 Bi-Weekly)
C.	Full Name of Individual (Last, First, Middle Initial) Whitman, Andrew, , , Mailing Address 704 Hatherleigh Rd) or Full C	Zip Code	Date of Receipt
	Baltimore FEC ID number of contributing federal political committee.		21212-1613	Transaction ID : PR1980201251299 Amount of Each Receipt this Period 375.00
	Name of Employer (for Individual) Varian Medical Systems Receipt For:	Vice	cupation (for Individual) e President, Government Affairs e Year-to-Date ▼	Memo Item
	Primary General Other (specify)		3000.00	P/R Deduction (\$125.00 Bi-Weekly) 490.00
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number onl		r	

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS			tegory of the Immary Page	X 11a 11b 11c 12 13 14 15 16 17							
	y information copied from such Reports and Stat for commercial purposes, other than using the n											
	NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc. PA	C ('Vari	an PAC')									
Α.	Full Name of Individual (Last, First, Middle Initia Wood, Robert, , ,	l) or Full C	rganization Na	me	Date of Receipt							
	Mailing Address 56 Centennial Way				11 28 2016							
	City San Ramon	State CA	Zip Code 94583-2	615	Transaction ID : PR1980201451299							
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period							
	Name of Employer (for Individual) Varian Medical Systems		upation (for Inc Ops/Manufactu	,	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	240.00	P/R Deduction (\$10.00 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initial Yuan, Julie, , ,	l) or Full C	rganization Na	me	Date of Receipt							
	Mailing Address 816 Killarney Ct	1			11 / D D / Y Y Y Y 128 2016							
	City Sunnyvale	State CA	Zip Code 94087-48	364	Transaction ID : PR1980201651299 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			30.00 Memo Item							
	Name of Employer (for Individual) Varian Medical Systems		upation (for Ind troller V	dividual)								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	240.00	P/R Deduction (\$10.00 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia Zankowski, Corey, , ,	l) or Full C	rganization Na	me	Date of Receipt							
	Mailing Address 1641 Kirk Court	-			11 28 / Y Y Y Y 2016							
	City San Jose	State CA	Zip Code 95124-48	300	Transaction ID : PR1980201751299							
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period							
	Name of Employer (for Individual) Varian Medical Systems		upation (for Inc Product Mgmt	lividual)	Memo Item							
	Dessint For	1	Year-to-Date	290.00	P/R Deduction (\$10.00 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			•••••	140.00							
т	OTAL This Period (last page this line number on	ly)										

FEC Schedule A (Form 3X) Rev. 06/2016

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
or fo	commercial purposes, other than using the r			to solicit contributions from such committee.					
\ \	AME OF COMMITTEE (In Full) arian Medical Systems, Inc. PA	C ('Varia	an PAC')						
	II Name of Individual (Last, First, Middle Initia Denecour, Jessica, , ,	al) or Full Or	rganization Name	Date of Receipt					
_	ailing Address 50 Coral Street	01-11-	7 contra	11 28 / Y Y Y Y 2016					
Ci P	ty acific Grove	State CA	Zip Code 93950-2158	Transaction ID : PR1981203651299					
FE	EC ID number of contributing deral political committee.	С		Amount of Each Receipt this Period					
	ame of Employer (for Individual) arian Medical Systems	Occu SVP	ipation (for Individual) CIO	Memo Item					
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)					
	III Name of Individual (Last, First, Middle Initia Star-Lack, Josh, , ,	al) or Full Or	rganization Name	Date of Receipt					
	ailing Address 902 Van Auken Circle			11 28 2016					
Ci	ty alo Alto	State CA	Zip Code 94303-3841	Transaction ID : PR1981204351299 Amount of Each Receipt this Period					
FE	EC ID number of contributing deral political committee.	С		45.00					
	ame of Employer (for Individual) irian Medical Systems		upation (for Individual) Igr, Research Science	Memo Item					
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$15.00 Bi-Weekly)					
	III Name of Individual (Last, First, Middle Initia	al) or Full Or	rganization Name	Date of Receipt					
M	ailing Address 783 Hernage Creek Rd			11 / D D / Y Y Y Y Y 28 2016					
Ci	ty agle	State CO	Zip Code 81631	Transaction ID : PR2016511051299					
FE	EC ID number of contributing deral political committee.	С		Amount of Each Receipt this Period					
	ame of Employer (for Individual) arian Medical Systems		ipation (for Individual) Global Prod SIs-SBU	Memo Item					
	Primary General Other (specify)		Year-to-Date ▼ 1200.00	P/R Deduction (\$50.00 Bi-Weekly)					
SUE	TOTAL of Receipts This Page (optional)			225.00					
тот	AL This Period (last page this line number or	nly)	•						

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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	MIZED RECEIPTS		for each category of Detailed Summary F		X 11a 11b 11c 12 13 14 15 16 17						
or f	information copied from such Reports and St or commercial purposes, other than using the										
\	Varian Medical Systems, Inc. PA	AC ('Vari	an PAC')								
	ull Name of Individual (Last, First, Middle Initi Kowal, John, , ,	al) or Full C	Organization Name		Date of Receipt						
_	Aailing Address 1905 Big Bend Cove				11 / D D / Y Y Y Y 2016						
	City Southlake	State TX	Zip Code 76092-6933	-	Transaction ID : PR2016511151299						
F	EC ID number of contributing ederal political committee.	C			Amount of Each Receipt this Period						
	lame of Employer (for Individual) /arian Medical Systems		upation (for Individual) Domestic Sales		Memo Item						
Ē	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 82	5.00	P/R Deduction (\$50.00 Bi-Weekly)						
	ull Name of Individual (Last, First, Middle Initi Vansaun, Richard, , ,	al) or Full C	Organization Name		Date of Receipt						
Ν	Nailing Address 1 Daffodil Lane				M M / D D / Y Y Y Y 11 28 2016						
	City Medway	State MA	Zip Code 02053-6201		Transaction ID : PR2016511251299 Amount of Each Receipt this Period						
	EC ID number of contributing ederal political committee.	С			P/R Deduction (\$10.00 Bi-Weekly)						
	Name of Employer (for Individual) /arian Medical Systems		cupation (for Individual) ector, Sales								
Ē	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	10.00							
	Full Name of Individual (Last, First, Middle Initi Cheng, Lea-Phane, , ,	al) or Full C	Organization Name		Date of Receipt						
_	Aailing Address 35 Kootenai Court	1			11 / D D / Y Y Y Y 2016						
	Dity Fremont	State CA	Zip Code 94539-6807	-	Transaction ID : PR2021049251299						
F	EC ID number of contributing ederal political committee.	С			Amount of Each Receipt this Period						
	lame of Employer (for Individual) /arian Medical Systems		upation (for Individual) /Igr, Budget/Finance		Memo Item						
	Receipt For: Primary General Other (specify)	1	Year-to-Date ▼	0.00	P/R Deduction (\$10.00 Bi-Weekly)						
su	BTOTAL of Receipts This Page (optional)				210.00						
то	TAL This Period (last page this line number c	nly)		····· ►							

FEC Schedule A (Form 3X) Rev. 06/2016

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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			Detailed Summary Page	×	11a		11	1b	11c	12				
					13		14		15	16	17			
	y information copied from such Reports and State for commercial purposes, other than using the na													
\rangle	Varian Medical Systems, Inc. PAC	C ('Varia	an PAC')											
Α.	Full Name of Individual (Last, First, Middle Initial) Colbeth, Richard, , ,	or Full O	rganization Name		Date of	Re	ece	ipt						
	Mailing Address 1243 Richardson Ave				11 28 2016									
	City	State	Zip Code		Trans	acti	ior	ו ID :	PR20210	04935129	9			
	Los Altos	CA	94024-6034	A	Mount	of	Ea	ach R	eceipt th	is Period				
	FEC ID number of contributing federal political committee.	С					-			120.0				
	Name of Employer (for Individual) Varian Medical Systems	Occu VP,		Me	emo	o It	em							
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 960.00	P/	'R Dedi	uctio	ion	(\$40.0	00 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initial) Hass, Jill, , ,	or Full O	rganization Name		Date of Receipt									
	Mailing Address 848 E Frisbie Way				11 / D D / Y Y Y Y 11 28 2016									
	City Salina	State KS	Zip Code 67401-9261	A	Transaction ID : PR2021049651299 Amount of Each Receipt this Period 30.00									
	FEC ID number of contributing federal political committee.	С												
	Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) · II, Professional Svc		Memo Item									
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/	P/R Deduction (\$10.00 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) Joda, Patrick, , ,	or Full O	rganization Name		Date of	Re	ece	ipt						
	Mailing Address 5192 Independence Drive				м м 11	1		28	/ Y	үүү 2016	Y			
	City Pleasanton	State CA	Zip Code 94566-7803							04975129	9			
	FFC ID number of contributing	C			Amount of Each Receipt this Period 60.00									
	Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) 9, OS Global Ops		Memo Item									
	Receipt For: A Primary General Other (specify)	Aggregate	Year-to-Date ▼ 480.00	P/	/R Ded	ucti	ion	(\$20.	00 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)		•••••				,			210.0	00			
т	OTAL This Period (last page this line number only	y)	••••••				-							

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS			for each category of the Detailed Summary Page		✗ 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and State for commercial purposes, other than using the na											
$\left.\right\rangle$	NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc. PAC	C ('Varia	an	PAC')								
Α.	Full Name of Individual (Last, First, Middle Initial) LaFave, Richard, , , Mailing Address 2790 Bellini Dr) or Full O	rga	nization Name		Date of Receipt						
	City	State		Zip Code	-	11 28 2016 Transaction ID : PR2021049851299						
	Henderson	NV		89052-3164		Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С	_			30.00						
	Name of Employer (for Individual) Varian Medical Systems		•	tion (for Individual) (Design) Mgr IV		Memo Item						
	Receipt For: Ø Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 230.00		P/R Deduction (\$10.00 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Initial)) or Full O	rga	nization Name		Date of Receipt						
	Mailing Address 42926 Joshua Tree Court	1-				11 / D D / Y Y Y Y Y 28 2016						
	City	State CA		Zip Code	-	Transaction ID : PR2021049951299						
	Murrieta FEC ID number of contributing federal political committee.	С	-	92562-8949		Amount of Each Receipt this Period 30.00 Memo Item						
	Name of Employer (for Individual) Varian Medical Systems		•	tion (for Individual) Field Service								
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 240.00		P/R Deduction (\$10.00 Bi-Weekly)						
С.	Full Name of Individual (Last, First, Middle Initial) Lindberg, Lawrence, , ,) or Full O	rga	nization Name		Date of Receipt						
	Mailing Address 3162 Stardust Street	1				11 / D D / Y Y Y Y 11 28 2016						
	City Rocklin	State CA		Zip Code 95677-1724		Transaction ID : PR2021050051299 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С	_			30.00						
	Name of Employer (for Individual) Varian Medical Systems		•	tion (for Individual) Prog/Proj Mgmt		Memo Item						
	Receipt For: // Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 240.00		P/R Deduction (\$10.00 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			•••••		90.00						
т	OTAL This Period (last page this line number onl	y)		•••••								

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc.	PAC ('Vari	an PAC')								
Full Name of Individual (Last, First, Middle Prionas, Stavros, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 180 Leland Ave			11 / D D / Y Y Y Y Y 28 2016							
City Marla Dark	State CA	Zip Code	Transaction ID : PR2021050251299							
Menlo Park	CA	94025-6163	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		30.00							
Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) iicl Trning Splst IV	Memo Item							
Receipt For:	Aggregate	Year-to-Date V								
Other (specify) ▼		240.00	P/R Deduction (\$10.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. Tran, Vy, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 906 Golden Way			11 28 2016							
City	State	Zip Code	Transaction ID : PR2021050351299							
Los Altos	CA	94024-5056	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		60.00							
Name of Employer (for Individual) Varian Medical Systems		cupation (for Individual) P, Regulatory Affairs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. Tupikov, Vitali, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 555 Chester Ct West			M M / D D / Y Y Y Y 11 28 2016							
City	State	Zip Code	Transaction ID : PR2021050451299							
Aurora	IL	60504-5229	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		30.00							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
Varian Medical Systems		ctrical Engineer IV								
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify)		240.00	P/R Deduction (\$10.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)		>	120.00							
TOTAL This Period (last page this line numb										

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc.	PAC ('Vari	an PAC')							
Full Name of Individual (Last, First, Middle LaCasce, Carl, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 5074 Red Fox Court	04-4-	7. 0.4	11 / D D / Y Y Y Y Y 28 2016						
City Park City	State UT	Zip Code 84098-7568	Transaction ID : PR2202643951299						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) General Mgr	Memo Item						
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1200.00	P/R Deduction (\$50.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Ryberg, Michael, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 5410 Greenfield Way	11 28 2016								
City Pleasanton	State CA	Zip Code 94566-5416	Transaction ID : PR2202644251299 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		60.00						
Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) Global Supply Chain	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. Suffoletta, James, , ,	Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 604 Indian Home Rd.			11 / 28 / Y Y Y Y 10 28 2016						
City Danville	State CA	Zip Code 94526-4365	Transaction ID : PR2202644351299 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) ctor, Product Mktg	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 840.00	P/R Deduction (\$10.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			240.00						
TOTAL This Period (last page this line numb	er only)								

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc. F	PAC ('Vari	an PAC')						
Full Name of Individual (Last, First, Middle Ii A. Vertatschitsch, Edward, , ,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 250 Oakview Drive	Ctata	Zin Code	11 28 2016					
City San Carlos	State CA	Zip Code 94070-4537	Transaction ID : PR2202644451299					
FEC ID number of contributing federal political committee.	С	34010-4331	Amount of Each Receipt this Period					
Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) Product Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 960.00	P/R Deduction (\$40.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle In B. Zhang, Xiao, , ,	nitial) or Full C	Organization Name	Date of Receipt					
Mailing Address 736 River Reserve Drive			11 28 2016					
City Hartland	State WI	Zip Code 53029-2906	Transaction ID : PR2202644551299 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.00					
Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) , General Mgr	P/R Deduction (\$10.00 Bi-Weekly)					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00						
Full Name of Individual (Last, First, Middle In C. Davis, Paul, , ,	nitial) or Full C	Organization Name	Date of Receipt					
Mailing Address 6139 Puerto Drive			11 / D D / Y Y Y Y 11 28 2016					
City Rancho Murieta	State CA	Zip Code 95683-9320	Transaction ID : PR2362779151299 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.00					
Name of Employer (for Individual) Varian Medical Systems		upation (for Individual) es Representative III	Memo Item					
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)	,		180.00					
TOTAL This Period (last page this line numbe								

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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	EMIZED RECEIPTS			for each category of the Detailed Summary Page		✗ 11a 11b 11c 12 13 14 15 16 17								
	y information copied from such Reports and State for commercial purposes, other than using the na													
	NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc. PAC	C ('Varia	an	PAC')										
Α.	Full Name of Individual (Last, First, Middle Initial) Guest, Trevor, , , Mailing Address 203 Thyme Cir	or Full O	rga	nization Name		Date of Receipt								
	City	State		Zip Code	_	11 28 2016 Transaction ID : PR2362779351299								
	Richland	WA		99352-8510	_	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С	_			30.00								
	Name of Employer (for Individual) Varian Medical Systems		•	tion (for Individual) Field Service		Memo Item								
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 240.00		P/R Deduction (\$10.00 Bi-Weekly)								
В.	Full Name of Individual (Last, First, Middle Initial) Hyzak, Paul, , ,	or Full O	rga	nization Name		Date of Receipt								
	Mailing Address 10 Vineyard Point Road					11 28 2016								
	City	State		Zip Code		Transaction ID : PR2362779451299								
	Guilford	СТ		06437-3233	_	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С	_			30.00								
	Name of Employer (for Individual) Varian Medical Systems		•	tion (for Individual) t Specialist IV		Memo Item								
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 240.00		P/R Deduction (\$10.00 Bi-Weekly)								
<u>с.</u>	Full Name of Individual (Last, First, Middle Initial)	or Full O	rga	nization Name		Date of Receipt								
	Mailing Address 918 Wyngate Ct.					M M / D D / Y Y Y Y 11 28 2016								
	City Safety Harbor	State FL		Zip Code 34695-5650	-	Transaction ID : PR2362779551299								
	FFC ID number of contributing	C				Amount of Each Receipt this Period 30.00								
	Name of Employer (for Individual) Varian Medical Systems		•	tion (for Individual)		Memo Item								
	Poppint For:	1		ar-to-Date ▼	\neg									
	Primary General Other (specify)	ggrogato	7	240.00		P/R Deduction (\$10.00 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			•••••		90.00								
т	OTAL This Period (last page this line number only	/)		•••••	-									

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 24 OF

	EMIZED RECEIPTS			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15	12 16	17	
	y information copied from such Reports and Stat for commercial purposes, other than using the n											
	Varian Medical Systems, Inc. PA	C ('Vari	an	PAC')								
Α.	Full Name of Individual (Last, First, Middle Initial Khuntia, Deepak, , ,) or Full C	Drga	nization Name		Date c	of Red	ceipt				
	Mailing Address 1358 Country Club Drive					M 11	1 /	D D 28	/ Y	2016	Ŷ	
	City Los Altos	State CA		Zip Code 94024-5302	-					7796512		
	FEC ID number of contributing federal political committee.	С	l		_	Amour		Each R	eceipt tr	nis Perio 60	a).00	
	Name of Employer (for Individual) Varian Medical Systems		•	tion (for Individual) dical Affairs		N	1emo	Item				
	Dessint For:			ar-to-Date ▼ 480.00	F	P/R Dec	ductic	on (\$20.	00 Bi-W	eekly)		
В.	Full Name of Individual (Last, First, Middle Initial Lippy, Denise, , ,) or Full C	Drga	nization Name		Date c	of Red	ceipt				
	Mailing Address 3204 Jackson St.					M M / D D / Y Y Y Y 11 28 2016						
	City Houston	State TX		Zip Code 77004-3034		Transaction ID : PR2362779751299 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С				Memo Item						
	Name of Employer (for Individual) Varian Medical Systems		•	ation (for Individual) Id Service								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Ye	ar-to-Date ▼ 240.00	P	P/R Deduction (\$10.00 Bi-Weekly)						
C.	Full Name of Individual (Last, First, Middle Initial Loar, Brian, , ,) or Full C	Drga	nization Name		Date c	of Red	ceipt				
	Mailing Address 4066 Chelsea Green East					^M 11	1 /	D D D 28	/ Y	2016	Y	
	City New Albany	State OH		Zip Code 43054-6017	-					7798512 nis Perio		
	FEC ID number of contributing federal political committee.	С				Amour					5.00	
	Varian Medical Systems S			tion (for Individual) ctor, Sales	_	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Ye	ar-to-Date ▼ 360.00	F	P/R Deduction (\$15.00 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			•				,	. ,	135	5.00	
т	OTAL This Period (last page this line number on	ly)		••••••		Ľ						

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
	y information copied from such Reports and State for commercial purposes, other than using the na			erson for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc. PAC	C ('Varia	an PAC')									
Α.	Full Name of Individual (Last, First, Middle Initial) Lowell, Matthew, , ,	Date of Receipt										
	Mailing Address 932 Covington Ct	State	Zip Code	11 28 2016 Transaction ID : PR2362779951299								
	Los Altos	CA	94024-5047	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		30.00								
	Name of Employer (for Individual) Varian Medical Systems		pation (for Individual) Controller	Memo Item								
	Receipt For: A Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)								
В.	Full Name of Individual (Last, First, Middle Initial) Pant, Anup, , ,	Date of Receipt										
	Mailing Address 726 Choctaw Drive	11 28 / Y Y Y Y Y 11 28										
	City Fremont	State CA	Zip Code 94539-7175	Transaction ID : PR2362780051299 Amount of Each Receipt this Period								
		С		0.00								
	Name of Employer (for Individual) Varian Medical Systems		ipation (for Individual) Engineer Iv (apps)	Memo Item								
	Receipt For: A Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 630.00	P/R Deduction (\$0.00 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initial) Wall, Kathryn, , ,	Date of Receipt										
	Mailing Address 9805 Withers Road	11 / D D / Y Y Y Y Y 2016										
	City Charlotte	State NC	Zip Code 28278-6821	Transaction ID : PR2362780151299								
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
	Name of Employer (for Individual) Varian Medical Systems		pation (for Individual) gr, Professional Svc	Memo Item								
	Receipt For: A Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			60.00								
т	OTAL This Period (last page this line number only	y)	•									

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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PAGE 26 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than usin	and Statements may not be sold or used by any pe g the name and address of any political committee									
NAME OF COMMITTEE (In Full) Varian Medical Systems, Inc	c. PAC ('Varian PAC')									
Full Name of Individual (Last, First, Midd Toth, Christopher, , , Mailing Address 1252 Coolidge Ave	Date of Receipt									
City San Jose	StateZip CodeCA95125-3226	11 28 2016 Transaction ID : PR2485129351299 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	300.00								
Name of Employer (for Individual) Varian Medical Systems Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) SVP, Regional Leader (AMER) Aggregate Year-to-Date ▼ 900.00	P/R Deduction (\$100.00 Bi-Weekly)								
Full Name of Individual (Last, First, Midd B. Mailing Address City	Date of Receipt									
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For:	State Zip Code C Occupation (for Individual) Aggregate Year-to-Date ▼	Amount of Each Receipt this Period								
C. Mailing Address	Date of Receipt									
City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify)	State Zip Code C Occupation (for Individual) Aggregate Year-to-Date ▼	Amount of Each Receipt this Period								
	al)	300.00								

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS			FOR LINE NUMBER: PAGE 27 OF 27													
		Use separate schedule(s) for each category of the		(c		-	only one) 21b 22 23 26 27									
		Detailed	Detailed Summary Page			215 28a	28b		23 28c	-	29	\vdash	30b			
	y information copied from such Reports and State for commercial purposes, other than using the na															
$\left \right\rangle$	NAME OF COMMITTEE (In Full)	× /n / ·														
Ľ	Varian Medical Systems, Inc. PAC	; ('Variar	1 PAC')													
Α.	Full Name (Last, First, Middle Initial) PayPal						Date of Disbursement									
								11 04 Y Y Y Y Y 2016								
	Mailing Address 2211 North First Street															
	City San Jose	State Zip Code CA 95131					FEC Identification Number									
	Purpose of Disbursement	93131			-		С									
	PayPal fee 001						Transaction ID : 74527059									
			Category/ Type				Amount of Each Disbursement this Period									
	Office Sought: House Disburse	sement For:					29.33									
	President	Primary Other (spe	General ecify) ▼				PayPal fee									
	State: District:	-		- · · ·					nem							
B.	Full Name (Last, First, Middle Initial) PayPal						Date of Disbursement									
								M M / D D / Y Y Y Y 11 14 2016								
	Mailing Address 2211 North First Street									14		2	016			
	City San Jose	State CA					FEC I	denti	ificatio	n N	umbe	er				
	Purpose of Disbursement						С									
	PayPal fees Candidate Name						Transaction ID : 74527111 Amount of Each Disbursement this Period									
	Catolicate Name Cat															
	Office Sought: House Disburse Senate	ement For:					10.75									
	President	Primary Other (spe				PayPal fees										
	State: District:						Memo Item									
C.	Full Name (Last, First, Middle Initial) PayPal						Date	of Di	sburse	eme	nt					
							M M / D D / Y Y Y Y									
	Mailing Address 2211 North First Street						10		2	28		2	016			
	City San Jose	State CA	Zip Code 95131				FEC I	FEC Identification Number								
	Purpose of Disbursement					C										
	PayPal fee 0 Candidate Name						Transaction ID : 74527114									
	Category/ Type						Amount of Each Disbursement this Period									
	Office Sought: House Disbursement For: Senate Primary General						72.80									
	President	Primary Other (spe						14	Рау	/Pal f	ee					
_	State: District:		<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				IV	emo	Item							
[LIBTOTAL of Dishuragements This Base (aptianal)												112.88	3		
Ļ	UBTOTAL of Disbursements This Page (optional).						÷	-	-	=	- 7	-	1 40	4		
т	OTAL This Period (last page this line number only	/)					1						112.88	3		