

**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="2014"/>		10406.15
(b) Cash on Hand at Beginning of Reporting Period.....	17288.15	
(c) Total Receipts (from Line 19)	3819.00	30201.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	21107.15	40607.15
7. Total Disbursements (from Line 31).....	2500.00	22000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	18607.15	18607.15
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

FEC Form 3X (Rev. 06/2004)

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).....	2625.00	23195.00
(ii) Unitemized	1194.00	7006.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3819.00	30201.00
(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)	3819.00	30201.00
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))..... ▶	3819.00	30201.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3819.00	30201.00

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.....	2500.00	22000.00
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)) ..	2500.00	22000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2500.00	22000.00

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)	3819.00	30201.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3819.00	30201.00
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: (check only one)	PAGE 6 OF 14
	<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	

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. Keith Askoff
Full Name (Last, First, Middle Initial)

Mailing Address 324 Mercy St.
26th Floor

City Mountain View State CA Zip Code 94041-2204

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

Name of Employer Varian Medical Systems Occupation Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 30 / 2014**

Transaction ID : PR1833140633791

Amount of Each Receipt this Period **60.00**

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

B. Catherine Deluca
Full Name (Last, First, Middle Initial)

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 Varian Medical Systems Occupation Manager, Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **06 / 30 / 2014**

Transaction ID : PR1980198433791

Amount of Each Receipt this Period **150.00**

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

C. Robert Drubka
Full Name (Last, First, Middle Initial)

Mailing Address 5250 S Rainbow Bl #1145

City Las Vegas State NV Zip Code 89118-0630

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

Name of Employer Varian Medical Systems Occupation General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **06 / 30 / 2014**

Transaction ID : PR1980198533791

Amount of Each Receipt this Period **150.00**

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

SUBTOTAL of Receipts This Page (optional).....▶	360.00
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"/> 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. Anna Emmons
Full Name (Last, First, Middle Initial)

Mailing Address 24 Aliso Wy

City Menlo Park State CA Zip Code 94028-7527

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

Name of Employer: Varian Medical Systems Occupation: VMS/VP Division HR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt: **06 / 30 / 2014**

Transaction ID : PR1980198733791

Amount of Each Receipt this Period: **30.00**

P/R Deduction (\$10.00 Bi-Weekly)

B. Jon Hollon
Full Name (Last, First, Middle Initial)

Mailing Address 322 Karen Av #3006

City Las Vegas State NV Zip Code 89109-0445

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

Name of Employer: Varian Medical Systems Occupation: Director, Worldwide Training and Educa

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt: **06 / 30 / 2014**

Transaction ID : PR1980199133791

Amount of Each Receipt this Period: **90.00**

P/R Deduction (\$30.00 Bi-Weekly)

c. 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: Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt: **06 / 30 / 2014**

Transaction ID : PR1980199633791

Amount of Each Receipt this Period: **30.00**

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 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. David Nisius
Full Name (Last, First, Middle Initial)

Mailing Address 315 Stafford Rd

City Des Plaines	State IL	Zip Code 60016-2109
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FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems	Occupation Engineer Manager
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1050.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : PR1980199833791

Amount of Each Receipt this Period

150.00

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

B. Mark Patzer
Full Name (Last, First, Middle Initial)

Mailing Address 424 3rd Ln S

City Kirkland	State WA	Zip Code 98033-6610
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FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems	Occupation Sales Representative
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : PR1980200133791

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

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

Mailing Address 2611 Ross Rd

City Chevy Chase	State MD	Zip Code 20815-3834
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FEC ID number of contributing federal political committee. **C**

Name of Employer Varian Medical Systems	Occupation Director Policy & Reimbursement
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : PR1980200633791

Amount of Each Receipt this Period

60.00

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

SUBTOTAL of Receipts This Page (optional).....▶	285.00
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. Tracy Ting
Full Name (Last, First, Middle Initial)
Mailing Address 10954 Stevens Canyon Rd
City State Zip Code
Cupertino CA 95014-3944
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Varian Medical Systems Sr Director
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1300.00

Date of Receipt
06 / 30 / 2014
Transaction ID : PR1980200833791
Amount of Each Receipt this Period
300.00
P/R Deduction (\$100.00 Bi-Weekly)

B. Maureen Tracy
Full Name (Last, First, Middle Initial)
Mailing Address 520 N Charter Street
City State Zip Code
Monticello IL 61856-1170
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Varian Medical Systems Director Federal Affairs
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
650.00

Date of Receipt
06 / 30 / 2014
Transaction ID : PR1980200933791
Amount of Each Receipt this Period
150.00
P/R Deduction (\$50.00 Bi-Weekly)

C. Gary Virshup
Full Name (Last, First, Middle Initial)
Mailing Address 753 Stendhal Ln
City State Zip Code
Cupertino CA 95014-4658
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Varian Medical Systems VMS/Dir Research Science
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
630.00

Date of Receipt
06 / 30 / 2014
Transaction ID : PR1980201033791
Amount of Each Receipt this Period
30.00
P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	480.00
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"/> 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')

Full Name (Last, First, Middle Initial) A. Andrew Whitman		Date of Receipt MM / DD / YYYY 06 / 30 / 2014
Mailing Address 704 Hatherleigh Rd		Transaction ID : PR1980201233791
City Baltimore	State MD	Zip Code 21212-1613
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00
Name of Employer Varian Medical Systems	Occupation Vice President	P/R Deduction (\$125.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1625.00	

Full Name (Last, First, Middle Initial) B. Jon Hopkins		Date of Receipt MM / DD / YYYY 06 / 30 / 2014
Mailing Address 1314 Featherwood Drive		Transaction ID : PR2016511033791
City Murphy	State TX	Zip Code 75094-4174
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Varian Medical Systems	Occupation World Wide Sales - Particle Therapy	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) C. John Kowal		Date of Receipt MM / DD / YYYY 06 / 30 / 2014
Mailing Address 1905 Big Bend Cove		Transaction ID : PR2016511133791
City Southlake	State TX	Zip Code 76092-6933
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Varian Medical Systems	Occupation Field Sales VP	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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. James Burke
Full Name (Last, First, Middle Initial)

Mailing Address 522 East First Avenue No3

City State Zip Code
Salt Lake City UT 84103-2980

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

Name of Employer Occupation
Varian Medical Systems Mechanical Engineer IV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
06 / 30 / 2014

Transaction ID : PR2021049133791

Amount of Each Receipt this Period
60.00

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

B. Richard Colbeth
Full Name (Last, First, Middle Initial)

Mailing Address 1243 Richardson Ave

City State Zip Code
Los Altos CA 94024-6034

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

Name of Employer Occupation
Varian Medical Systems VP, R&D & Engineering

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt
06 / 30 / 2014

Transaction ID : PR2021049333791

Amount of Each Receipt this Period
120.00

P/R Deduction (\$40.00 Bi-Weekly)

C. Patrick Joda
Full Name (Last, First, Middle Initial)

Mailing Address 5192 Independence Drive

City State Zip Code
Pleasanton CA 94566-7803

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

Name of Employer Occupation
Varian Medical Systems VP, OS Cust Svc Spt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
06 / 30 / 2014

Transaction ID : PR2021049733791

Amount of Each Receipt this Period
60.00

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

SUBTOTAL of Receipts This Page (optional).....▶	240.00
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: PAGE 12 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Vy Tran
 Full Name (Last, First, Middle Initial)
 Mailing Address 367 Santana Heights no 5038
 City San Jose State CA Zip Code 95128-2096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Varian Medical Systems Occupation VP, Regulatory Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2014
Transaction ID : PR2021050333791
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

B. Carl LaCasce
 Full Name (Last, First, Middle Initial)
 Mailing Address 5074 Red Fox Court
 City Park City State UT Zip Code 84098-7568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Varian Medical Systems Occupation VP General Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2014
Transaction ID : PR2202643933791
 Amount of Each Receipt this Period 150.00
 P/R Deduction (\$50.00 Bi-Weekly)

C. Michael Ryberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 53 Essex Lane
 City Irvine State CA Zip Code 92620-0241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Varian Medical Systems Occupation VP Global Supply Chain
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2014
Transaction ID : PR2202644233791
 Amount of Each Receipt this Period 150.00
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 360.00
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: PAGE 13 OF 14
(check only one)

<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. James Suffoletta
Full Name (Last, First, Middle Initial)
Mailing Address 604 Indian Home Rd.
City Danville State CA Zip Code 94526-4365
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Director Marketing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2014
Transaction ID : PR2202644333791
Amount of Each Receipt this Period 150.00
P/R Deduction (\$50.00 Bi-Weekly)

B.
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

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

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	2625.00

**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. Georgians For Isakson

Mailing Address Post Office Box 250116

City Atlanta State GA Zip Code 30325

Purpose of Disbursement
Contribution: Johnny Isakson (R-GA)

011

Candidate Name

Sen. Johnny Isakson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: GA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 25 / 2014

Transaction ID : 60624280

Amount of Each Disbursement this Period

1000.00

Contribution: Johnny Isakson (R-GA)

Full Name (Last, First, Middle Initial)

B. Marsha Blackburn For Congress, Inc.

Mailing Address PO Box 3750

City Brentwood State TN Zip Code 37024

Purpose of Disbursement
Contribution: Marsha Blackburn (R-7th TN)

011

Candidate Name

Rep. Marsha Blackburn

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District: 07

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 25 / 2014

Transaction ID : 60625094

Amount of Each Disbursement this Period

1500.00

Contribution: Marsha Blackburn (R-7th TN)

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

2500.00

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

2500.00