

**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"/>	<input type="text" value="10406.15"/>	<input type="text" value="10406.15"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="8621.15"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="3456.00"/>	<input type="text" value="42171.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="12077.15"/>	<input type="text" value="52577.15"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11000.00"/>	<input type="text" value="51500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1077.15"/>	<input type="text" value="1077.15"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

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

Report Covering the Period: From: 10 / 16 / 2014 To: 11 / 24 / 2014

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).....	3270.00	32350.00
(ii) Unitemized	186.00	9821.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3456.00	42171.00
(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)	3456.00	42171.00
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))..... ▶	3456.00	42171.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3456.00	42171.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	11000.00	51500.00
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)) ..	11000.00	51500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11000.00	51500.00

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)	3456.00	42171.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3456.00	42171.00
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 23
<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')

Full Name (Last, First, Middle Initial) A. Keith Askoff		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 24 / 2014 Transaction ID : PR1833140637652
Mailing Address 324 Mercy St. 26th Floor		Amount of Each Receipt this Period 60.00
City Mountain View	State CA	Zip Code 94041-2204
FEC ID number of contributing federal political committee. C		P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer Varian Medical Systems	Occupation Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

Full Name (Last, First, Middle Initial) B. David Bisciotti		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 24 / 2014 Transaction ID : PR1980198137652
Mailing Address 5025 Brent Knoll Ln		Amount of Each Receipt this Period 30.00
City Suwanee	State GA	Zip Code 30024-1377
FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Varian Medical Systems	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. Douglas Carlisle		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 24 / 2014 Transaction ID : PR1980198237652
Mailing Address 11714 Littler Rd		Amount of Each Receipt this Period 30.00
City Sandy	State UT	Zip Code 84092-5762
FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Varian Medical Systems	Occupation Sr Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

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 7 OF 23
	<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. Gayle Cichocki
Full Name (Last, First, Middle Initial)

Mailing Address 386 Chadwick Cir

City Henderson State NV Zip Code 89014-4523

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

Name of Employer: Varian Medical Systems Occupation: National Tech Supply Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt: 11 / 24 / 2014
Transaction ID : PR1980198337652

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

P/R Deduction (\$10.00 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 ▼ **830.00**

Date of Receipt: 11 / 24 / 2014
Transaction ID : PR1980198437652

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 ▼ **1150.00**

Date of Receipt: 11 / 24 / 2014
Transaction ID : PR1980198537652

Amount of Each Receipt this Period: **150.00**

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

SUBTOTAL of Receipts This Page (optional)..... **330.00**

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 23
	<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 ▼ **430.00**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR1980198737652

Amount of Each Receipt this Period **30.00**

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

B. Carlos Garces
Full Name (Last, First, Middle Initial)

Mailing Address 11760 NW 27th St

City Plantation State FL Zip Code 33323-1856

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

Name of Employer Varian Medical Systems Occupation Customer Support Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR1980198837652

Amount of Each Receipt this Period **30.00**

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

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

Mailing Address 710 Chestnut Ct

City Algonquin State IL Zip Code 60102-2118

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

Name of Employer Varian Medical Systems Occupation SW Engineer IV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR1980199037652

Amount of Each Receipt this Period **30.00**

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 9 OF 23
	<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. 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 ▼ 690.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR1980199137652
Amount of Each Receipt this Period 90.00
P/R Deduction (\$30.00 Bi-Weekly)

B. David Hurlock
Full Name (Last, First, Middle Initial)
Mailing Address 2045 Ashburton Way
City Mount Pleasant State SC Zip Code 29466-6877
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Manager, Sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR1980199237652
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

C. Theodore Jackson
Full Name (Last, First, Middle Initial)
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 Varian Medical Systems Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR1980199337652
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 10 OF 23
<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. Stacy June
Full Name (Last, First, Middle Initial)
Mailing Address 174 Mosby Woods Dr
City Newnan State GA Zip Code 30265-2212
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Manager II
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR1980199437652
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

B. Mark Kaye
Full Name (Last, First, Middle Initial)
Mailing Address 1830 High Trail
City Atlanta State GA Zip Code 30339-8470
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 ▼ 230.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR1980199537652
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 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 ▼ 550.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR1980199637652
Amount of Each Receipt this Period 30.00
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 11 OF 23
<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. Stanley Mansfield
Full Name (Last, First, Middle Initial)

Mailing Address 1137 S Bernardo Ave

City Sunnyvale State CA Zip Code 94087-2057

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

Name of Employer: Varian Medical Systems Occupation: Sr Manager, Research Science

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt: **11 / 24 / 2014**

Transaction ID : PR1980199737652

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

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

B. David Nisius
Full Name (Last, First, Middle Initial)

Mailing Address 315 Stafford Rd

City Des Plaines State IL Zip Code 60016-2109

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 ▼ **1550.00**

Date of Receipt: **11 / 24 / 2014**

Transaction ID : PR1980199837652

Amount of Each Receipt this Period: **150.00**

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

c. Mary O'Byrne
Full Name (Last, First, Middle Initial)

Mailing Address 290 Live Oak Ln

City Los Altos State CA Zip Code 94022-2175

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

Name of Employer: Varian Medical Systems Occupation: VP, Associate General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt: **11 / 24 / 2014**

Transaction ID : PR1980199937652

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

P/R Deduction (\$10.00 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 12 OF 23
	<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. Alan Palter
Full Name (Last, First, Middle Initial)

Mailing Address 2035 Queens Lane

City San Mateo State CA Zip Code 94402-3930

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

Name of Employer Varian Medical Systems Occupation Senior Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR1980200037652

Amount of Each Receipt this Period **30.00**

P/R Deduction (\$10.00 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

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 ▼ **575.00**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR1980200137652

Amount of Each Receipt this Period **75.00**

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

C. Michael Petrillo
Full Name (Last, First, Middle Initial)

Mailing Address 7910 Boothill Drive

City Park City State UT Zip Code 84098-5394

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

Name of Employer Varian Medical Systems Occupation Sr Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR1980200237652

Amount of Each Receipt this Period **30.00**

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

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 23
<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')

Full Name (Last, First, Middle Initial) A. Jeff Shue		Date of Receipt MM / DD / YYYY 11 / 24 / 2014
Mailing Address 2721 NW 78th St		Transaction ID : PR1980200537652
City Topeka	State KS	Zip Code 66618-2107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Varian Medical Systems	Occupation Product Spt Engineer IV	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) B. Stacy Stordahl		Date of Receipt MM / DD / YYYY 11 / 24 / 2014
Mailing Address 2611 Ross Rd		Transaction ID : PR1980200637652
City Chevy Chase	State MD	Zip Code 20815-3834
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Varian Medical Systems	Occupation Director Policy & Reimbursement	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

Full Name (Last, First, Middle Initial) C. Tracy Ting		Date of Receipt MM / DD / YYYY 11 / 24 / 2014
Mailing Address 10954 Stevens Canyon Rd		Transaction ID : PR1980200837652
City Cupertino	State CA	Zip Code 95014-3944
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.00
Name of Employer Varian Medical Systems	Occupation Sr Director	P/R Deduction (\$0.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1450.00	

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 14 OF 23
	<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. Maureen Tracy
Full Name (Last, First, Middle Initial)
Mailing Address 520 N Charter Street
City Monticello State IL Zip Code 61856-1170
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Director Federal Affairs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR1980200937652
Amount of Each Receipt this Period 150.00
P/R Deduction (\$50.00 Bi-Weekly)

B. Gary Virshup
Full Name (Last, First, Middle Initial)
Mailing Address 753 Stendhal Ln
City Cupertino State CA Zip Code 95014-4658
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation VMS/Dir Research Science
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 730.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR1980201037652
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

C. Andrew Whitman
Full Name (Last, First, Middle Initial)
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 Varian Medical Systems Occupation Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2875.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR1980201237652
Amount of Each Receipt this Period 375.00
P/R Deduction (\$125.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 555.00
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 15 OF 23
	<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. Robert Wood
Full Name (Last, First, Middle Initial)
Mailing Address 56 Centennial Way
City San Ramon State CA Zip Code 94583-2615
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation VP, Ops Manufacturing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR1980201437652
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

B. Julie Yuan
Full Name (Last, First, Middle Initial)
Mailing Address 816 Killarney Ct
City Sunnyvale State CA Zip Code 94087-4864
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Controller V
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR1980201637652
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

C. Corey Zankowski
Full Name (Last, First, Middle Initial)
Mailing Address 1641 Kirk Ct
City San Jose State CA Zip Code 95124-4800
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Sr Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR1980201737652
Amount of Each Receipt this Period 30.00
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 16 OF 23
<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. George Zentai
Full Name (Last, First, Middle Initial)

Mailing Address 1054 Blackfield Way

City Mountain View State CA Zip Code 94040-2303

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

Name of Employer Varian Medical Systems Occupation Sr Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR1980201837652

Amount of Each Receipt this Period **30.00**

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

B. Josh Star-Lack
Full Name (Last, First, Middle Initial)

Mailing Address 902 Van Auken Circle

City Palo Alto State CA Zip Code 94303-3841

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

Name of Employer Varian Medical Systems Occupation Ginzton Tech Ctr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR1981204337652

Amount of Each Receipt this Period **45.00**

P/R Deduction (\$15.00 Bi-Weekly)

C. Jon Hopkins
Full Name (Last, First, Middle Initial)

Mailing Address 1314 Featherwood Drive

City Murphy State TX Zip Code 75094-4174

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

Name of Employer Varian Medical Systems Occupation World Wide Sales - Particle Therapy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1150.00**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR2016511037652

Amount of Each Receipt this Period **150.00**

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

SUBTOTAL of Receipts This Page (optional)..... **225.00**

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 17 OF 23
<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')

Full Name (Last, First, Middle Initial) A. John Kowal		Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 1905 Big Bend Cove		Transaction ID : PR2016511137652
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 ▼ 575.00	

Full Name (Last, First, Middle Initial) B. Richard Vansaun		Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 1 Daffodil Lane		Transaction ID : PR2016511237652
City Medway	State MA	Zip Code 02053-6201
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.00	
Name of Employer Varian Medical Systems	Occupation Regional Director	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. James Burke		Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 522 East First Avenue No3		Transaction ID : PR2021049137652
City Salt Lake City	State UT	Zip Code 84103-2980
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 60.00	
Name of Employer Varian Medical Systems	Occupation Mechanical Engineer IV	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

SUBTOTAL of Receipts This Page (optional).....▶	165.00
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 18 OF 23
	<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. Lea-Phane Cheng
Full Name (Last, First, Middle Initial)
Mailing Address 35 Kootenai Court

City Fremont	State CA	Zip Code 94539-6807
-----------------	-------------	------------------------

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

Name of Employer Varian Medical Systems	Occupation Sr Mgr, Budget Finance
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2014

Transaction ID : PR2021049237652

Amount of Each Receipt this Period

30.00

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

B. Richard Colbeth
Full Name (Last, First, Middle Initial)
Mailing Address 1243 Richardson Ave

City Los Altos	State CA	Zip Code 94024-6034
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **920.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2014

Transaction ID : PR2021049337652

Amount of Each Receipt this Period

120.00

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

C. Jill Hass
Full Name (Last, First, Middle Initial)
Mailing Address 848 E Frisbie Way

City Salina	State KS	Zip Code 67401-9261
----------------	-------------	------------------------

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

Name of Employer Varian Medical Systems	Occupation Clinicl Implmnt Cnslt IV
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2014

Transaction ID : PR2021049637652

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 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 19 OF 23
	<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. Patrick Joda
Full Name (Last, First, Middle Initial)
Mailing Address 5192 Independence Drive
City Pleasanton State CA Zip Code 94566-7803
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation VP, OS Cust Svc Spt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR2021049737652
Amount of Each Receipt this Period 60.00
P/R Deduction (\$20.00 Bi-Weekly)

B. Richard LaFave
Full Name (Last, First, Middle Initial)
Mailing Address 2790 Bellini Dr
City Henderson State NV Zip Code 89052-3164
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Project (Design) Mgr IV
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR2021049837652
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 Bi-Weekly)

C. Richard Lerma
Full Name (Last, First, Middle Initial)
Mailing Address 42926 Joshua Tree Court
City Murrieta State CA Zip Code 92562-8949
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Mgr II, Field Service (CSS)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR2021049937652
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 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 20 OF 23
	<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. Lawrence Lindberg
Full Name (Last, First, Middle Initial)

Mailing Address 3162 Stardust Street

City Rocklin State CA Zip Code 95677-1724

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

Name of Employer: Varian Medical Systems Occupation: Director, Prog Proj Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt: **11 / 24 / 2014**

Transaction ID : PR2021050037652

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

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

B. Stavros Prionas
Full Name (Last, First, Middle Initial)

Mailing Address 180 Leland Ave

City Menlo Park State CA Zip Code 94025-6163

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

Name of Employer: Varian Medical Systems Occupation: Clinical Trning Splst IV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt: **11 / 24 / 2014**

Transaction ID : PR2021050237652

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

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

C. 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 ▼ **460.00**

Date of Receipt: **11 / 24 / 2014**

Transaction ID : PR2021050337652

Amount of Each Receipt this Period: **60.00**

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:	PAGE 21 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Vitali Tupikov
Full Name (Last, First, Middle Initial)
Mailing Address 555 Chester Ct West
City Aurora State IL Zip Code 60504-5229
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Electrical Engineer IV
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR2021050437652
Amount of Each Receipt this Period 30.00
P/R Deduction (\$10.00 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 ▼ 750.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR2202643937652
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 ▼ 750.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR2202644237652
Amount of Each Receipt this Period 150.00
P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	330.00
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 22 OF 23
	<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. James Suffoletta			Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 604 Indian Home Rd.			Transaction ID : PR2202644337652
City Danville	State CA	Zip Code 94526-4365	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Varian Medical Systems	Occupation Director Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Edward Vertatschitsch			Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 250 Oakview Drive			Transaction ID : PR2202644437652
City San Carlos	State CA	Zip Code 94070-4537	Amount of Each Receipt this Period 120.00
FEC ID number of contributing federal political committee. C			
Name of Employer Varian Medical Systems	Occupation Sr Dir General Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Aimee Bennett			Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address PO Box 15768			Transaction ID : PR2261512537652
City Washington	State DC	Zip Code 20003-0768	Amount of Each Receipt this Period 0.00
FEC ID number of contributing federal political committee. C			
Name of Employer Varian Medical Systems	Occupation Director, Intl Programs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		P/R Deduction (\$0.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	270.00
TOTAL This Period (last page this line number only).....▶	3270.00

**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. Upton Victory Committee

Mailing Address 228 S Washington Street
Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution: Upton Victory Committee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 12 / 2014

Transaction ID : 63133767

Amount of Each Disbursement this Period

5000.00

Contribution: Upton Victory Committee

Full Name (Last, First, Middle Initial)

B. Searchlight Leadership Fund

Mailing Address 422 C Street, NE
Lower Level

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution: Searchlight Fund

Candidate Name

Searchlight Leadership Fund

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 19 / 2014

Transaction ID : 63133786

Amount of Each Disbursement this Period

5000.00

Contribution: Searchlight Fund

Full Name (Last, First, Middle Initial)

C. Shore PAC

Mailing Address P.O. Box 3157

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement
Contribution: Shore PAC

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : 63133810

Amount of Each Disbursement this Period

1000.00

Contribution: Shore PAC

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

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

11000.00

11000.00