

**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="2013"/>		21897.15
(b) Cash on Hand at Beginning of Reporting Period.....	21712.15	
(c) Total Receipts (from Line 19)	15194.00	33009.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	36906.15	54906.15
7. Total Disbursements (from Line 31).....	26500.00	44500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	10406.15	10406.15
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

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).....	13910.00	24595.00
(ii) Unitemized	284.00	4914.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	14194.00	29509.00
(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)	14194.00	29509.00
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.....	1000.00	3500.00
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))..... ▶	15194.00	33009.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	15194.00	33009.00

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.....	26500.00	44500.00
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)) ..	26500.00	44500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26500.00	44500.00

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)	14194.00	29509.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14194.00	29509.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 26
(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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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 ▼ **520.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : PR1833140630596

Amount of Each Receipt this Period
260.00

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

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

Mailing Address 5025 Brent Knoll Ln

City Suwanee State GA Zip Code 30024-1377

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 ▼ **260.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : PR1980198130596

Amount of Each Receipt this Period
130.00

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

c. Douglas Carlisle
Full Name (Last, First, Middle Initial)

Mailing Address 11714 Littler Rd

City Sandy State UT Zip Code 84092-5762

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 ▼ **260.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : PR1980198230596

Amount of Each Receipt this Period
130.00

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

SUBTOTAL of Receipts This Page (optional).....▶	520.00
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 26
<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. 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 ▼ 260.00

Date of Receipt 12 / 31 / 2013
Transaction ID : PR1980198330596
Amount of Each Receipt this Period 130.00
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 ▼ 260.00

Date of Receipt 12 / 31 / 2013
Transaction ID : PR1980198430596
Amount of Each Receipt this Period 130.00
P/R Deduction (\$10.00 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 ▼ 1300.00

Date of Receipt 12 / 31 / 2013
Transaction ID : PR1980198530596
Amount of Each Receipt this Period 650.00
P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 910.00
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 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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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 Human Resources
 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
 12 / 31 / 2013
Transaction ID : PR1980198730596
 Amount of Each Receipt this Period
 130.00
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2013
Transaction ID : PR1980198830596
 Amount of Each Receipt this Period
 130.00
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2013
Transaction ID : PR1980199030596
 Amount of Each Receipt this Period
 130.00
 P/R Deduction (\$10.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 26
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Jon Hollon
Full Name (Last, First, Middle Initial)
Mailing Address 322 Karen Av #3006
City Las Vegas State NV Zip Code 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 ▼ 780.00

Date of Receipt 12 / 31 / 2013
Transaction ID : PR1980199130596
Amount of Each Receipt this Period 390.00
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 ▼ 260.00

Date of Receipt 12 / 31 / 2013
Transaction ID : PR1980199230596
Amount of Each Receipt this Period 130.00
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 ▼ 260.00

Date of Receipt 12 / 31 / 2013
Transaction ID : PR1980199330596
Amount of Each Receipt this Period 130.00
P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	650.00
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 10 OF 26
	(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')

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

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 ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : PR1980199430596

Amount of Each Receipt this Period
130.00

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

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

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 ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : PR1980199530596

Amount of Each Receipt this Period
130.00

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

Full Name (Last, First, Middle Initial)
c. Ching Clifton Ling

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 ▼ **1300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : PR1980199630596

Amount of Each Receipt this Period
650.00

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

SUBTOTAL of Receipts This Page (optional).....▶	910.00
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 26
	<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. 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 ▼ **260.00**

Date of Receipt: **12 / 31 / 2013**

Transaction ID : PR1980199730596

Amount of Each Receipt this Period: **130.00**

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 ▼ **2600.00**

Date of Receipt: **12 / 31 / 2013**

Transaction ID : PR1980199830596

Amount of Each Receipt this Period: **1300.00**

P/R Deduction (\$100.00 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 ▼ **260.00**

Date of Receipt: **12 / 31 / 2013**

Transaction ID : PR1980199930596

Amount of Each Receipt this Period: **130.00**

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

SUBTOTAL of Receipts This Page (optional)..... **1560.00**

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 26
	(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')

Full Name (Last, First, Middle Initial) A. Alan Palter		Date of Receipt 12 / 31 / 2013 Transaction ID : PR1980200030596
Mailing Address 2035 Queens Lane		Amount of Each Receipt this Period 130.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Mark Patzer		Date of Receipt 12 / 31 / 2013 Transaction ID : PR1980200130596
Mailing Address 424 3rd Ln S		Amount of Each Receipt this Period 325.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Michael Petrillo		Date of Receipt 12 / 31 / 2013 Transaction ID : PR1980200230596
Mailing Address 7910 Boothill Drive		Amount of Each Receipt this Period 130.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	585.00
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 26
	<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. Jeff Shue
Full Name (Last, First, Middle Initial)
Mailing Address 2721 NW 78th St
City Topeka State KS Zip Code 66618-2107
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Product Spt Engineer IV
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **260.00**

Date of Receipt **12 / 31 / 2013**
Transaction ID : PR1980200530596
Amount of Each Receipt this Period **130.00**
P/R Deduction (\$10.00 Bi-Weekly)

B. Stacy Stordahl
Full Name (Last, First, Middle Initial)
Mailing Address 2611 Ross Rd
City Chevy Chase State MD Zip Code 20815-3834
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation Director Policy & Reimbursement
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **520.00**

Date of Receipt **12 / 31 / 2013**
Transaction ID : PR1980200630596
Amount of Each Receipt this Period **260.00**
P/R Deduction (\$20.00 Bi-Weekly)

C. Andrea Tabert
Full Name (Last, First, Middle Initial)
Mailing Address 2330 University Ave #200
City East Palo Alto State CA Zip Code 94303-1698
FEC ID number of contributing federal political committee. **C**
Name of Employer Varian Medical Systems Occupation SW QA Engineer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **260.00**

Date of Receipt **12 / 31 / 2013**
Transaction ID : PR1980200730596
Amount of Each Receipt this Period **130.00**
P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **520.00**
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 26
	<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. 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 ▼
2600.00

Date of Receipt
12 / 31 / 2013
Transaction ID : PR1980200830596
Amount of Each Receipt this Period
1300.00
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 ▼
1300.00

Date of Receipt
12 / 31 / 2013
Transaction ID : PR1980200930596
Amount of Each Receipt this Period
650.00
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 Director, Research Science
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
260.00

Date of Receipt
12 / 31 / 2013
Transaction ID : PR1980201030596
Amount of Each Receipt this Period
130.00
P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	2080.00
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 15 OF 26
	(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. 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 ▼ 3250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : PR1980201230596

Amount of Each Receipt this Period
 1625.00

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

B. 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : PR1980201430596

Amount of Each Receipt this Period
 130.00

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

C. 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : PR1980201630596

Amount of Each Receipt this Period
 130.00

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

SUBTOTAL of Receipts This Page (optional).....▶	1885.00
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 26
	<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. 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 ▼ 260.00

Date of Receipt
12 / 31 / 2013
Transaction ID : PR1980201730596

Amount of Each Receipt this Period
130.00

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

B. 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 ▼ 260.00

Date of Receipt
12 / 31 / 2013
Transaction ID : PR1980201830596

Amount of Each Receipt this Period
130.00

P/R Deduction (\$10.00 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 ▼ 1300.00

Date of Receipt
12 / 31 / 2013
Transaction ID : PR2016511030596

Amount of Each Receipt this Period
650.00

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

SUBTOTAL of Receipts This Page (optional).....▶	910.00
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 26
	<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. John Kowal
Full Name (Last, First, Middle Initial)

Mailing Address 1905 Big Bend Cove

City Southlake State TX Zip Code 76092-6933

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

Name of Employer Varian Medical Systems Occupation Field Sales VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
12 / 31 / 2013
Transaction ID : PR2016511130596

Amount of Each Receipt this Period
325.00

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

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

Mailing Address 1 Daffodil Lane

City Medway State MA Zip Code 02053-6201

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

Name of Employer Varian Medical Systems Occupation Regional Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
12 / 31 / 2013
Transaction ID : PR2016511230596

Amount of Each Receipt this Period
130.00

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

C. Owen Brimhall
Full Name (Last, First, Middle Initial)

Mailing Address 11217 S Crescentridge Circle

City South Jordan State UT Zip Code 84095-4058

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

Name of Employer Varian Medical Systems Occupation Sr Mgr, Mechanical Eng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt
12 / 31 / 2013
Transaction ID : PR2021049030596

Amount of Each Receipt this Period
195.00

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

SUBTOTAL of Receipts This Page (optional).....▶	650.00
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 26
	<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. James Burke
Full Name (Last, First, Middle Initial)

Mailing Address 522 East First Avenue No3

City Salt Lake City State UT Zip Code 84103-2980

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

Name of Employer: Varian Medical Systems Occupation: Mechanical Engineer IV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt: **12 / 31 / 2013**

Transaction ID : PR2021049130596

Amount of Each Receipt this Period: **260.00**

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

B. 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 ▼ **260.00**

Date of Receipt: **12 / 31 / 2013**

Transaction ID : PR2021049230596

Amount of Each Receipt this Period: **130.00**

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

C. 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 ▼ **1040.00**

Date of Receipt: **12 / 31 / 2013**

Transaction ID : PR2021049330596

Amount of Each Receipt this Period: **520.00**

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

SUBTOTAL of Receipts This Page (optional)..... **910.00**

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 19 OF 26
	(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')

Full Name (Last, First, Middle Initial) A. Jill Hass		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013 Transaction ID : PR2021049630596
Mailing Address 848 E Frisbie Way		Amount of Each Receipt this Period 130.00
City Salina	State KS	Zip Code 67401-9261
FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Varian Medical Systems	Occupation Clinic Implmnt Cnslt IV	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Patrick Joda		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013 Transaction ID : PR2021049730596
Mailing Address 5192 Independence Drive		Amount of Each Receipt this Period 260.00
City Pleasanton	State CA	Zip Code 94566-7803
FEC ID number of contributing federal political committee. C		P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer Varian Medical Systems	Occupation VP, OS Cust Svc/Spt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) C. Richard LaFave		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013 Transaction ID : PR2021049830596
Mailing Address 2790 Bellini Dr		Amount of Each Receipt this Period 130.00
City Henderson	State NV	Zip Code 89052-3164
FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Varian Medical Systems	Occupation Project (Design) Mgr IV	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional).....▶	520.00
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 26
	<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. 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 ▼ 260.00

Date of Receipt: 12 / 31 / 2013
Transaction ID : PR2021049930596

Amount of Each Receipt this Period: 130.00

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

B. 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 ▼ 260.00

Date of Receipt: 12 / 31 / 2013
Transaction ID : PR2021050030596

Amount of Each Receipt this Period: 130.00

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

C. 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: Clinicl Trning Splst IV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 31 / 2013
Transaction ID : PR2021050230596

Amount of Each Receipt this Period: 130.00

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 OF 26
	(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. 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 ▼
520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2013

Transaction ID : PR2021050330596

Amount of Each Receipt this Period
260.00

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

B. 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 ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2013

Transaction ID : PR2021050430596

Amount of Each Receipt this Period
130.00

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

C. David Soss
Full Name (Last, First, Middle Initial)
Mailing Address 3816 Villa Drive

City Salt Lake City	State UT	Zip Code 84109-4045
------------------------	-------------	------------------------

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

Name of Employer Varian Medical Systems	Occupation Hardware Dev Engineer III
--	---

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
12	/	31	/	2013

Transaction ID : PR2023740930596

Amount of Each Receipt this Period
130.00

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

SUBTOTAL of Receipts This Page (optional).....	520.00
TOTAL This Period (last page this line number only).....	13910.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 OF 26
(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')

Full Name (Last, First, Middle Initial)
A. Re-Elect Tim Griffin For Congress Committee

Mailing Address P.O. Box 7526

City Little Rock State AR Zip Code 72217

FEC ID number of contributing federal political committee. **C** C00468116

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : 57900827

Amount of Each Receipt this Period
1000.00

Refund of contribution dated 3/21/13

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

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
 M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

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
 M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00

**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. Kind For Congress Committee

Mailing Address 205 5th Avenue South

City La Crosse State WI Zip Code 54601

Purpose of Disbursement
Contribution: Ron Kind (D-3rd WI)

011

Category/
Type

Candidate Name

Rep. Ron Kind

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WI District: 03

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2013

Transaction ID : 57900813

Amount of Each Disbursement this Period

1000.00

Contribution: Ron Kind (D-3rd WI)

Full Name (Last, First, Middle Initial)

B. Glacier PAC

Mailing Address 818 Connecticut Ave. NW #1009
Suite 1009

City Washington State DC Zip Code 20006

Purpose of Disbursement
Contribution: Glacier PAC

011

Category/
Type

Candidate Name

Glacier PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 26 / 2013

Transaction ID : 57900814

Amount of Each Disbursement this Period

5000.00

Contribution: Glacier PAC

Full Name (Last, First, Middle Initial)

C. Rogers For Congress

Mailing Address PO Box 581

City Brighton State MI Zip Code 48116

Purpose of Disbursement
Contribution: Mike Rogers (R-8th MI)

011

Category/
Type

Candidate Name

Rep. Michael J. Rogers

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MI District: 08

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 26 / 2013

Transaction ID : 57900816

Amount of Each Disbursement this Period

2500.00

Contribution: Mike Rogers (R-8th MI)

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

8500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Friends For Harry Reid

Mailing Address P.O. Box 19163

City Las Vegas State NV Zip Code 89132

Purpose of Disbursement
Contribution: Harry Reid (D-NV)

011

Candidate Name

Sen. Harry Reid

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NV District:

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2013

Transaction ID : 57900818

Amount of Each Disbursement this Period

5000.00

Contribution: Harry Reid (D-NV)

Full Name (Last, First, Middle Initial)

B. Friends For Harry Reid

Mailing Address P.O. Box 19163

City Las Vegas State NV Zip Code 89132

Purpose of Disbursement
Contribution: Harry Reid (D-NV)

011

Candidate Name

Sen. Harry Reid

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NV District:

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2013

Transaction ID : 57900819

Amount of Each Disbursement this Period

3000.00

Contribution: Harry Reid (D-NV)

Full Name (Last, First, Middle Initial)

C. Vern Buchanan For Congress

Mailing Address P. O. Box 48928

City Sarasota State FL Zip Code 34230

Purpose of Disbursement
Contribution: Vern Buchanan (R-16th FL)

011

Candidate Name

Rep. Vern Buchanan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 16

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2013

Transaction ID : 57900821

Amount of Each Disbursement this Period

2500.00

Contribution: Vern Buchanan (R-16th FL)

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

10500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Friends Of Schumer

Mailing Address 192 Lexington Avenue Suite 1001

City New York State NY Zip Code 10016

Purpose of Disbursement
Contribution: Charles Schumer (D-NY)

011

Candidate Name
Sen. Charles E. Schumer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 24 / 2013

Transaction ID : 57900823

Amount of Each Disbursement this Period

1000.00

Contribution: Charles Schumer (D-NY)

Full Name (Last, First, Middle Initial)

B. Friends Of Joe Heck

Mailing Address PO Box 750114

City Las Vegas State NV Zip Code 89136

Purpose of Disbursement
Contribution: Joe Heck (R-3rd NV)

011

Candidate Name
Rep. Joseph J. Heck

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NV District: 03

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2013

Transaction ID : 57900824

Amount of Each Disbursement this Period

1000.00

Contribution: Joe Heck (R-3rd NV)

Full Name (Last, First, Middle Initial)

C. Tim Scott For Senate

Mailing Address 1405 Ashley River Road

City Charleston State SC Zip Code 29407

Purpose of Disbursement
Contribution: Tim Scott (R-SC)

011

Candidate Name
Sen. Tim Scott

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: SC District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 19 / 2013

Transaction ID : 57900826

Amount of Each Disbursement this Period

500.00

Contribution: Tim Scott (R-SC)

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

2500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Searchlight Leadership Fund

Mailing Address 422 C Street, NE
Lower Level

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution: Searchlight Leadership

011
Category/ Type

Candidate Name
Searchlight Leadership Fund

Office Sought: House Senate President
 Disbursement For: Primary General
 Other (specify) ▼
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2013

Transaction ID : 57900828

Amount of Each Disbursement this Period

5000.00

Contribution: Searchlight Leadership

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General
 Other (specify) ▼
 State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General
 Other (specify) ▼
 State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

5000.00
26500.00