

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

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

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>		13197.13
(b) Cash on Hand at Beginning of Reporting Period.....	16029.06	
(c) Total Receipts (from Line 19)	2191.60	12489.60
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	18220.66	25686.73
7. Total Disbursements (from Line 31).....	4500.00	11966.07
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	13720.66	13720.66
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

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).....	1644.60	7877.60
(ii) Unitemized	547.00	4612.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2191.60	12489.60
(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)	2191.60	12489.60
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)).....▶	2191.60	12489.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2191.60	12489.60

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	6.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	6.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4500.00	11500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	460.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	460.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4500.00	11966.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4500.00	11966.07

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	2191.60	12489.60
34. Total Contribution Refunds (from Line 28(d))	0.00	460.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2191.60	12029.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	6.07
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	6.07

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Deluca, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 Oconnor St
 City Menlo Park State CA Zip Code 94025-2663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Accountant V
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 06 / 30 / 2022
Transaction ID : PR1980198482118
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Patzer, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 424 3rd Lane South
 City Kirkland State WA Zip Code 98033-6610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Sr Mgr, Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2022
Transaction ID : PR1980200182118
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

C. Tracy, Maureen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1122 N State Street
 City Monticello State IL Zip Code 61856-1152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Executive Director, Access to Cancer C
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 30 / 2022
Transaction ID : PR1980200982118
 Amount of Each Receipt this Period 250.00
 Memo Item
 P/R Deduction (\$0.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	400.00
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 11
<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. Whitman, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 704 Hatherleigh Rd
 City Baltimore State MD Zip Code 21212-1613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Vice President, Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2307.60

Date of Receipt 06 / 30 / 2022
Transaction ID : PR1980201282118
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. Kowal, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1905 Big Bend Cove
 City Southlake State TX Zip Code 76092-6933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) VP, Domestic Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2022
Transaction ID : PR2016511182118
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Tran, Vy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 906 Golden Way
 City Los Altos State CA Zip Code 94024-5056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) SVP, Regulatory Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ - 220.00

Date of Receipt 06 / 30 / 2022
Transaction ID : PR2021050382118
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	524.60
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 11
<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. Ryberg, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5410 Greenfield Way
 City Pleasanton State CA Zip Code 94566-5416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) VP, Global Supply Chain
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 30 / 2022
Transaction ID : PR2202644282118
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

B. Khuntia, Deepak, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1358 Country Club Drive
 City Los Altos State CA Zip Code 94024-5302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Vp Medical Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 30 / 2022
Transaction ID : PR2362779682118
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

C. Toth, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1252 Coolidge Ave
 City San Jose State CA Zip Code 95125-3226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) SVP, Regional Leader (AMER)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 06 / 30 / 2022
Transaction ID : PR2485129382118
 Amount of Each Receipt this Period 200.00
 Memo Item
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	280.00
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 11
<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. Earwicker, Adam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1614 Towell Lane
 City Escondido State CA Zip Code 92029-3110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Dir Strtgc Bus Devel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 30 / 2022
Transaction ID : PR2498165482118
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

B. Snyder, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 Hunters Mill Ln Woodstock
 City Woodstock State GA Zip Code 30188-3026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Sr Mgr Installations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2022
Transaction ID : PR2498166282118
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Hennie, Alicia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1425 4th St SW A608
 City Washington State DC Zip Code 20024-2251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Head of Gov Affairs, OSS & Emerg Bus
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2022
Transaction ID : PR2622507982118
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	240.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 11
<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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Foster, Stephanie, , ,

Mailing Address 1833 W Periwinkle Way

City Chandler	State AZ	Zip Code 85248-4263
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Varian Medical Systems	Occupation (for Individual) VP, Revenue & Operations Strategy
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	30	/	2022

Transaction ID : PR2764080382118

Amount of Each Receipt this Period
200.00

Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	1644.60

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. Cathy McMorris Rodgers For Congress

Mailing Address Box 137

City
Spokane

State
WA

Zip Code
99210

Purpose of Disbursement
Contribution: Cathy McMorris Rodgers (R-5th WA)

011

Category/
Type

Candidate Name

McMorris Rodgers, Cathy, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: WA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	20	/	2022

FEC Identification Number

C C00390476

Transaction ID : 85985355

Amount of Each Disbursement this Period

2500.00

Memo Item Contribution: Cathy McMorris Rodgers (R-5th WA)

Full Name (Last, First, Middle Initial)

B. Friends Of Todd Young, Inc.

Mailing Address PO Box 1053

City
Bloomington

State
IN

Zip Code
47402

Purpose of Disbursement
Contribution: Todd Young (R-IN)

011

Category/
Type

Candidate Name

Young, Todd, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

State: IN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	22	/	2022

FEC Identification Number

C C00459255

Transaction ID : 85985358

Amount of Each Disbursement this Period

2000.00

Contribution: Todd Young (R-IN)

Memo Item

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
	/		/	

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

4500.00

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

4500.00