

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
Varian Medical Systems, Inc. PAC ('Varian PAC')

ADDRESS (number and street) 801 Pennsylvania Avenue, NW  
Suite 730  
Washington DC 20004  
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00450965 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [MM] / [DD] / [YYYY] in the State of [ ]  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] through [MM] / [DD] / [YYYY]  
01 / 01 / 2019 through 06 / 30 / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Whitman, Andrew, , ,  
Type or Print Name of Treasurer

Signature of Treasurer Whitman, Andrew, , , [Electronically Filed] Date 07 / 30 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**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="2019"/>	<input type="text" value="31330.90"/>	<input type="text" value="31330.90"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="31330.90"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="15653.00"/>	<input type="text" value="15653.00"/>
(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="46983.90"/>	<input type="text" value="46983.90"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="23013.65"/>	<input type="text" value="23013.65"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="23970.25"/>	<input type="text" value="23970.25"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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:  /  /  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).....	10505.00	10505.00
(ii) Unitemized .....	5148.00	5148.00
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	15653.00	15653.00
(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) .....	15653.00	15653.00
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)).....▶	15653.00	15653.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	15653.00	15653.00

**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 .....	13.65	13.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	13.65	13.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	23000.00	23000.00
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	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 (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)) ..	23013.65	23013.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23013.65	23013.65

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	15653.00	15653.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15653.00	15653.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	13.65	13.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	13.65	13.65

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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. Gresham, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2930 NW Chardonnay Lane  
 City Bend State OR Zip Code 97703-5292  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Varian Occupation (for Individual) Sales Representative III  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 14 / 2019**  
**Transaction ID : 80340831**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 PayPal contribution

**B. Davis, John Jr, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 35211 St. Joe Road  
 City Dade City State FL Zip Code 33525-8162  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Sales Representative III  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt **03 / 22 / 2019**  
**Transaction ID : 80340857**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 PayPal contribution

**C. 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 ▼ 650.00

Date of Receipt **06 / 30 / 2019**  
**Transaction ID : PR1980198466509**  
 Amount of Each Receipt this Period 650.00  
 Memo Item  
 P/R Deduction (\$50.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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. 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 ▼ 325.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : PR1980200166509**  
 Amount of Each Receipt this Period 325.00  
 Memo Item  
 P/R Deduction (\$25.00 Bi-Weekly)

**B. Stordahl, Stacy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 (for Individual) Varian Medical Systems Occupation (for Individual) Sr Dir, Reimb/Hlth Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : PR1980200666509**  
 Amount of Each Receipt this Period 325.00  
 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 ▼ 580.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : PR1980200966509**  
 Amount of Each Receipt this Period 580.00  
 Memo Item  
 P/R Deduction (\$100.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1230.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. 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 ▼ 1625.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : PR1980201266509**  
 Amount of Each Receipt this Period 1625.00  
 Memo Item  
 P/R Deduction (\$125.00 Bi-Weekly)

**B. Hopkins, Jon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 783 Hernage Creek Rd  
 City Eagle State CO Zip Code 81631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Dir, Global Prod Sls-SBU  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : PR2016511066509**  
 Amount of Each Receipt this Period 650.00  
 Memo Item  
 P/R Deduction (\$50.00 Bi-Weekly)

**C. 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 ▼ 650.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : PR2016511166509**  
 Amount of Each Receipt this Period 650.00  
 Memo Item  
 P/R Deduction (\$50.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2925.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 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. 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 ▼ 260.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : PR2021050366509**  
 Amount of Each Receipt this Period 260.00  
 Memo Item  
 P/R Deduction (\$20.00 Bi-Weekly)

**B. 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 ▼ 260.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : PR2202644266509**  
 Amount of Each Receipt this Period 260.00  
 Memo Item  
 P/R Deduction (\$20.00 Bi-Weekly)

**C. Vertatschitsch, Edward, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 250 Oakview Drive  
 City San Carlos State CA Zip Code 94070-4537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) VP, Product Mgmt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : PR2202644466509**  
 Amount of Each Receipt this Period 520.00  
 Memo Item  
 P/R Deduction (\$40.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1040.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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. 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 ▼ 260.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : PR236277966509**  
 Amount of Each Receipt this Period 260.00  
 Memo Item  
 P/R Deduction (\$20.00 Bi-Weekly)

**B. 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 ▼ 1300.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : PR2485129366509**  
 Amount of Each Receipt this Period 1300.00  
 Memo Item  
 P/R Deduction (\$100.00 Bi-Weekly)

**C. Davis, John Jr, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 35211 St. Joe Road  
 City Dade City State FL Zip Code 33525-8162  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Sales Representative III  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1090.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : PR2498165366509**  
 Amount of Each Receipt this Period 890.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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

**A. 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 ▼ 260.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : PR2498165466509**  
 Amount of Each Receipt this Period 260.00  
 Memo Item  
 P/R Deduction (\$20.00 Bi-Weekly)

**B. Rabago, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21261 Eastglen Dr.  
 City Trabuco Canyon State CA Zip Code 92679-3364  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Varian Medical Systems Occupation (for Individual) Sales Representative IV  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : PR2498166166509**  
 Amount of Each Receipt this Period 850.00  
 Memo Item  
 P/R Deduction (\$100.00 Bi-Weekly)

**C. 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 ▼ 650.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : PR2498166266509**  
 Amount of Each Receipt this Period 650.00  
 Memo Item  
 P/R Deduction (\$50.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1760.00
<b>TOTAL</b> This Period (last page this line number only).....	10505.00

**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"/> 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. Perdue For Senate**

Mailing Address PO Box 12077

City Atlanta State GA Zip Code 30355

Purpose of Disbursement  
Contribution: David Perdue (R-GA)

011

Category/  
Type

Candidate Name  
**Perdue, David, , Sen.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: GA District:

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2019

FEC Identification Number

C C00547570

**Transaction ID : 80340860**

Amount of Each Disbursement this Period

5000.00

Contribution: David Perdue (R-GA)

Memo Item

Full Name (Last, First, Middle Initial)

**B. Perdue For Senate**

Mailing Address PO Box 12077

City Atlanta State GA Zip Code 30355

Purpose of Disbursement  
Contribution: David Perdue (R-GA)

011

Category/  
Type

Candidate Name  
**Perdue, David, , Sen.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: GA District:

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2019

FEC Identification Number

C C00547570

**Transaction ID : 80340863**

Amount of Each Disbursement this Period

5000.00

Contribution: David Perdue (R-GA)

Memo Item

Full Name (Last, First, Middle Initial)

**C. New PAC**

Mailing Address P.O. Box 7480

City Visalia State CA Zip Code 93290

Purpose of Disbursement  
Contribution: New PAC

011

Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2019

FEC Identification Number

C C00398750

**Transaction ID : 80340864**

Amount of Each Disbursement this Period

2500.00

Contribution: New PAC

Memo Item

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

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

12500.00

**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"/> 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')**

**A. Vern Buchanan For Congress**

Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 48928

City Sarasota State FL Zip Code 34230

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

Candidate Name  
**Buchanan, Vern, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: FL District: 16

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2019

FEC Identification Number

C C00412759

Transaction ID : **80340867**  
Amount of Each Disbursement this Period

500.00

Memo Item Contribution: Vern Buchanan (R-16th FL)

**B. CHC BOLD PAC**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement  
Contribution: CHC BOLD PAC

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
04 / 04 / 2019

FEC Identification Number

C C00365536

Transaction ID : **80340868**  
Amount of Each Disbursement this Period

2500.00

Memo Item Contribution: CHC BOLD PAC

**C. Scott Peters For Congress**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 22074

City San Diego State CA Zip Code 92192

Purpose of Disbursement  
Contribution: Scott Peters (D-52nd CA)

Candidate Name  
**Peters, Scott, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: CA District: 52

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2019

FEC Identification Number

C C00503110

Transaction ID : **80340877**  
Amount of Each Disbursement this Period

2000.00

Memo Item Contribution: Scott Peters (D-52nd CA)

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

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

5000.00

**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"/> 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. George Holding For Congress Inc.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	1	9

Mailing Address PO Box 97187

City Raleigh State NC Zip Code 27624

FEC Identification Number

**C** C00499236

**Transaction ID : 80340878**

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement  
Contribution: George Holding (R-2nd NC)

**011**  
Category/  
Type

Candidate Name  
**Holding, George, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: NC District: 13

Memo Item Contribution: George Holding (R-2nd NC)

Full Name (Last, First, Middle Initial)  
**B. Nevadans For Steven Horsford**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	9

Mailing Address PO Box 336664

City North Las Vegas State NV Zip Code 89033

FEC Identification Number

**C** C00668228

**Transaction ID : 80340879**

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement  
Contribution: Steve Horsford (D-4th NV)

**011**  
Category/  
Type

Candidate Name  
**Horsford, Steven, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: NV District: 04

Memo Item Contribution: Steve Horsford (D-4th NV)

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Mailing Address

City State Zip Code

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/  
Type

Candidate Name

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

Memo Item

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

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

5500.00
23000.00