

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

ADDRESS (number and street) 7000 CARDINAL PLACE  
 Check if different than previously reported. (ACC)  
DUBLIN OH 43017

2. **FEC IDENTIFICATION NUMBER** C00332833  
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 Quarterly 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 \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 06 01 2010 through 06 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ronald S. Siemiontkoswki

Signature of Treasurer Electronically Filed by Ronald S. Siemiontkoswki Date 07 14 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		216351.64
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	204089.15									
(c) Total Receipts (from Line 19) .....	13292.69	77506.20								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	217381.84	293857.84								
7. Total Disbursements (from Line 31) .....	15000.00	91476.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	202381.84	202381.84								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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) .....	11058.53	52578.70
(ii) Unitemized .....	2228.68	24884.18
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	13287.21	77462.88
(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) .....	13287.21	77462.88
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.) .....	5.48	43.32
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 Transfer (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)) .....	13292.69	77506.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	13292.69	77506.20

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared 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	676.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	676.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14000.00	71500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	1000.00	19300.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	15000.00	91476.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15000.00	91476.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	13287.21	77462.88
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13287.21	77462.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	676.00
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	676.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Andrew Alderman	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 1 / 2 0 1 0
	Mailing Address 1225 Leicester Pl.	<b>Transaction ID:</b> 00714.C96921
	City State Zip Code Columbus OH 43235	Amount of Each Receipt this Period 76.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Svp, Strategy & Bus Dev	Payroll Deduction: (38.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Adriana Ayala	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 1 / 2 0 1 0
	Mailing Address 11016 Sw 77 Ct Cir	<b>Transaction ID:</b> 00714.C96882
	City State Zip Code Pinecrest FL 33156	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Account (strat Accts Ips)	Payroll Deduction: (20.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Cassandra Baker	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 1 / 2 0 1 0
	Mailing Address 1751 Barrington Rd	<b>Transaction ID:</b> 00714.C96972
	City State Zip Code Upper Arlington OH 43221	Amount of Each Receipt this Period 121.70
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Govt Relations Mgmt	Payroll Deduction: (60.85- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 791.05	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>237.70</b>
<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: PAGE 7 / 48  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC**

**A.**

Full Name (Last, First, Middle Initial)  
James Barker

Mailing Address 2761 Skelton Ln

City State Zip Code  
Blacklick OH 43004

FEC ID number of contributing federal political committee. C

Name of Employer Cardinal Health, Inc Occupation Vp, Strategic Sourcing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.74

Date of Receipt 06 / 11 / 2010

**Transaction ID:** 00714.C96903

Amount of Each Receipt this Period 53.96

Receipt

Payroll Deduction: (26.98- /Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
George Barrett

Mailing Address 1038 Mill Rd Circle

City State Zip Code  
Rydal PA 19046

FEC ID number of contributing federal political committee. C

Name of Employer Cardinal Health, Inc Occupation Chairman/ceo, Cardinal Health

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2499.90

Date of Receipt 06 / 11 / 2010

**Transaction ID:** 00714.C96864

Amount of Each Receipt this Period 384.60

Receipt

Payroll Deduction: (192.3- 0/Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Lois Barrett

Mailing Address 2934 Central St #3e

City State Zip Code  
Evanston IL 60201

FEC ID number of contributing federal political committee. C

Name of Employer Cardinal Health, Inc Occupation Vp, Sales Operations Mgmt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 418.00

Date of Receipt 06 / 11 / 2010

**Transaction ID:** 00714.C96924

Amount of Each Receipt this Period 76.00

Receipt

Payroll Deduction: (38.00- /Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... 514.56

**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 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary Baxter	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 9601 St Regis Terr	<b>Transaction ID:</b> 00714.C96917
	City Richmond State VA Zip Code 23236	Amount of Each Receipt this Period 76.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Pharmacy Operations Mgmt	Payroll Deduction: (38.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 418.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Johnni Beckel	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 3680 Nicoya Court Court	<b>Transaction ID:</b> 00714.C96809
	City Lewis Center State OH Zip Code 43035	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Svp, Hr Business Partner	Payroll Deduction: (100.0- 0/Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Laurel Beeler	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 1723 Eagle Trl	<b>Transaction ID:</b> 00714.C96899
	City Oxford State MI Zip Code 48371	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Dir, Sales Training Mgmt	Payroll Deduction: (25.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>326.00</b>
<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 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard Belisle		Date of Receipt
	Mailing Address 201 E New England Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 11 / 2010
	City	State	Zip Code
	Worthington	OH	43085
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 00714.C96842
Name of Employer Cardinal Health, Inc		Occupation Dir, Aviation Mgmt	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 247.00	<input type="text"/> 38.00
			Receipt
			Payroll Deduction: (19.00- /Bi-Weekly )

<b>B.</b>	Full Name (Last, First, Middle Initial) Shelley Bird		Date of Receipt
	Mailing Address 7998 Caraway Ave		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 11 / 2010
	City	State	Zip Code
	Dublin	OH	43016
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 00714.C96807
Name of Employer Cardinal Health, Inc		Occupation Evp, Public Affairs	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 1300.00	<input type="text"/> 200.00
			Receipt
			Payroll Deduction: (100.0- 0/Bi-Weekly )

<b>C.</b>	Full Name (Last, First, Middle Initial) Mark Blake		Date of Receipt
	Mailing Address 2226 Bryden Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 11 / 2010
	City	State	Zip Code
	Columbus	OH	43209
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 00714.C96865
Name of Employer Cardinal Health, Inc		Occupation Evp, Strategy & Corp Devel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 2499.90	<input type="text"/> 384.60
			Receipt
			Payroll Deduction: (192.3- 0/Bi-Weekly )

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 622.60
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 10 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC**

**A.** Full Name (Last, First, Middle Initial)  
Eric Bolling

Mailing Address 13162 Thornton Drive

City State Zip Code  
 Frisco TX 75035

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

Name of Employer Cardinal Health, Inc      Occupation Vp, Account (strat Accts Ips)

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt: 06 / 11 / 2010  
**Transaction ID:** 00714.C96860  
 Amount of Each Receipt this Period: 38.00  
 Receipt  
 Payroll Deduction: (19.00- /Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Terry Burnside

Mailing Address 6202 Wealthy Lane

City State Zip Code  
 Dublin OH 43016

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

Name of Employer Cardinal Health, Inc      Occupation Svp, Gm Medicine Shoppe

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt: 06 / 11 / 2010  
**Transaction ID:** 00714.C96969  
 Amount of Each Receipt this Period: 100.00  
 Receipt  
 Payroll Deduction: (50.00- /Bi-Weekly)

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

Mailing Address 3810 Loch Glen Ct

City State Zip Code  
 Houston TX 77059

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

Name of Employer Cardinal Health, Inc      Occupation Vp, Regulatory (atty)

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 446.16

Date of Receipt: 06 / 11 / 2010  
**Transaction ID:** 00714.C96911  
 Amount of Each Receipt this Period: 68.64  
 Receipt  
 Payroll Deduction: (34.32- /Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **206.64**

**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 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Steven Callison		Date of Receipt
	Mailing Address 1368 Lincoln Road		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Columbus	OH	43212
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Cardinal Health, Inc		Occupation Vp, App Design & Devel	Transaction ID: 00714.C96838
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="226.59"/>	Amount of Each Receipt this Period <input type="text" value="34.86"/>
			Receipt
			Payroll Deduction: (17.43- /Bi-Weekly )

<b>B.</b>	Full Name (Last, First, Middle Initial) Anthony Caprio		Date of Receipt
	Mailing Address 6 Cottage Lane		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Marlboro	NJ	07746
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Cardinal Health, Inc		Occupation Evp, Sales	Transaction ID: 00714.C96808
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1300.00"/>	Amount of Each Receipt this Period <input type="text" value="200.00"/>
			Receipt
			Payroll Deduction: (100.0- 0/Bi-Weekly )

<b>C.</b>	Full Name (Last, First, Middle Initial) William Christian		Date of Receipt
	Mailing Address 4310 Gretna Court		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Kennesaw	GA	30152
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Cardinal Health, Inc		Occupation Vp, Account (strat Accts Ips)	Transaction ID: 00714.C96916
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="342.00"/>	Amount of Each Receipt this Period <input type="text" value="76.00"/>
			Receipt
			Payroll Deduction: (38.00- /Bi-Weekly )

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="310.86"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Charles Cobb		Date of Receipt
	Mailing Address 2948 S. Colonial St.		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Gilbert	AZ	85295
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Cardinal Health, Inc		Occupation Vp, Account (strat Accts Ips)	Transaction ID: 00714.C96932
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="456.00"/>	<input type="text" value="76.00"/>
			Receipt
			Payroll Deduction: (38.00- /Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Jack Coffey		Date of Receipt
	Mailing Address 200 Bay Shore Drive		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Rockwood	TN	37854
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Cardinal Health, Inc		Occupation Svp, Qra	Transaction ID: 00714.C96812
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1300.00"/>	<input type="text" value="200.00"/>
			Receipt
			Payroll Deduction: (100.0- 0/Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Craig Cowman		Date of Receipt
	Mailing Address 6851 Killilea Drive		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Dublin	OH	43017
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Cardinal Health, Inc		Occupation Svp, Product Management	Transaction ID: 00714.C96957
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="550.00"/>	<input type="text" value="100.00"/>
			Receipt
			Payroll Deduction: (50.00- /Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="376.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Sally Curley	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 9035 Esin Court	<b>Transaction ID:</b> 00714.C96975
	City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt Payroll Deduction: (75.00- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Svp, Investor Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ted Dibiase	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 4954 Rosegate Court Island Drive	<b>Transaction ID:</b> 00714.C96973
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 122.40
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt Payroll Deduction: (61.20- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Vp, Hr Business Partners	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 795.60	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Duffy	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 6825 Macneil Dr	<b>Transaction ID:</b> 00714.C96883
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt Payroll Deduction: (20.00- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Evp, Global Mfg & Supply Chain	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>312.40</b>
<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 14 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Gary Ellis	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 6146 Balmoral Drive	<b>Transaction ID:</b> 00714.C96890
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt Payroll Deduction: (20.00- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Svp/gm, Midwest Region	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Stephen Falk	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 2480 Sandover Rd	<b>Transaction ID:</b> 00714.C96810
	City State Zip Code Columbus OH 43220	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt Payroll Deduction: (100.0-0 /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Evp & General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Stephen Flannery	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 275 East Center St	<b>Transaction ID:</b> 00714.C96841
	City State Zip Code Shavertown PA 18708	Amount of Each Receipt this Period 38.02
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt Payroll Deduction: (19.01- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Vp, Direct Sales Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.13	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>278.02</b>
<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: PAGE 15 / 48  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

**A.** Full Name (Last, First, Middle Initial)  
Jeffrey Foreman  
Mailing Address 9392 Culross Ct  
City Dublin State OH Zip Code 43017  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cardinal Health, Inc Occupation Vp, Supplier Relations  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 220.00  
Date of Receipt 06 / 11 / 2010  
Transaction ID: 00714.C96887  
Amount of Each Receipt this Period 40.00  
Receipt  
Payroll Deduction: (20.00- /Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Joshua Gaines  
Mailing Address 5721 Clover Lane Drive  
City Westerville State OH Zip Code 43081  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cardinal Health, Inc Occupation Svp, Assoc General Counsel  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 377.00  
Date of Receipt 06 / 11 / 2010  
Transaction ID: 00714.C96904  
Amount of Each Receipt this Period 58.00  
Receipt  
Payroll Deduction: (29.00- /Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Robert Giacalone  
Mailing Address 7471 Balfoure Circle  
City Dublin State OH Zip Code 43017  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cardinal Health, Inc Occupation Svp, Reg Affairs/chf Reg Cnsl  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 640.08  
Date of Receipt 06 / 11 / 2010  
Transaction ID: 00714.C96962  
Amount of Each Receipt this Period 100.00  
Receipt  
Payroll Deduction: (50.00- /Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... **198.00**  
**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 16 / 48  
(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
							17

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NAME OF COMMITTEE (In Full)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

**A.**

Full Name (Last, First, Middle Initial) Robert Glover		Date of Receipt MM / DD / YYYY 06 / 11 / 2010
Mailing Address 5633 N Kostner Avenue		Transaction ID: 00714.C96898
City Chicago	State IL	Zip Code 60646
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Cardinal Health, Inc	Occupation Vp, Account (health Systems)	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	Payroll Deduction: (25.00- /Bi-Weekly )

**B.**

Full Name (Last, First, Middle Initial) David Goldsberry		Date of Receipt MM / DD / YYYY 06 / 11 / 2010
Mailing Address 321 St Andrews Ln		Transaction ID: 00714.C96926
City Gurnee	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.00
Name of Employer Cardinal Health, Inc	Occupation Vp, Direct Sales Mgmt	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00	Payroll Deduction: (38.00- /Bi-Weekly )

**C.**

Full Name (Last, First, Middle Initial) David Gonzales		Date of Receipt MM / DD / YYYY 06 / 11 / 2010
Mailing Address 384 Colorado Drive		Transaction ID: 00714.C96965
City Cedar Creek	State TX	Zip Code 78612
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Cardinal Health, Inc	Occupation Dir, State Govt Relations	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	Payroll Deduction: (50.00- /Bi-Weekly )

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	226.00
<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 17 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Linda Gordien	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 2135 Tulare Ct	<b>Transaction ID:</b> 00714.C96881
	City State Zip Code Upland CA 91784	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt Payroll Deduction: (20.00- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Vp, Account (strat Accts Ips)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Joseph Gottron	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 874 Aylesbury Drive	<b>Transaction ID:</b> 00714.C96885
	City State Zip Code Gahanna OH 43230	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt Payroll Deduction: (20.00- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Svp, Pharmaceutical Segment It	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Carolyn Grant	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 6869 Meadow Glen Dr	<b>Transaction ID:</b> 00714.C96923
	City State Zip Code Westerville OH 43082	Amount of Each Receipt this Period 76.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt Payroll Deduction: (38.00- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Dir, Fed Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 488.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	156.00
<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: PAGE 18 / 48  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
**CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC**

**A.**

Full Name (Last, First, Middle Initial)  
Donald Greenwood

Mailing Address 323 Old Dunn Court

City State Zip Code  
**Lake Mary FL 32746**

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

Name of Employer Cardinal Health, Inc Occupation Vp, Account (strat Accts Ips)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **06 / 11 / 2010**

**Transaction ID: 00714.C96896**

Amount of Each Receipt this Period **50.00**

Receipt

Payroll Deduction: (25.00- /Bi-Weekly )

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey Greer

Mailing Address 1570 Cambridge Blvd

City State Zip Code  
**Marble Cliff OH 43212**

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

Name of Employer Cardinal Health, Inc Occupation Dir, It Business Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt **06 / 11 / 2010**

**Transaction ID: 00714.C96846**

Amount of Each Receipt this Period **38.00**

Receipt

Payroll Deduction: (19.00- /Bi-Weekly )

**C.**

Full Name (Last, First, Middle Initial)  
John Grisdale

Mailing Address 7135 Fodor

City State Zip Code  
**New Albany OH 43054**

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

Name of Employer Cardinal Health, Inc Occupation Vp, Marketing Mgmt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 11 / 2010**

**Transaction ID: 00714.C96888**

Amount of Each Receipt this Period **40.00**

Receipt

Payroll Deduction: (20.00- /Bi-Weekly )

**SUBTOTAL** of Receipts This Page (optional) ..... ► **128.00**

**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 / 48  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

**A.**

Full Name (Last, First, Middle Initial)  
Michael Groesbeck

Mailing Address 33916 North Summerfields Drive

City State Zip Code  
Gurnee IL 60031

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

Name of Employer Cardinal Health, Inc Occupation Svp, Qra Medical

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 388.89

Date of Receipt: 06 / 11 / 2010  
Transaction ID: 00714.C96946  
Amount of Each Receipt this Period: 80.00  
Receipt  
Payroll Deduction: (40.00- /Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Gregory Halvacs

Mailing Address 4964 Olentangy River River Rd

City State Zip Code  
Delaware OH 43015

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

Name of Employer Cardinal Health, Inc Occupation Svp, Corporate Security

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt: 06 / 11 / 2010  
Transaction ID: 00714.C96850  
Amount of Each Receipt this Period: 38.00  
Receipt  
Payroll Deduction: (19.00- /Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Troy Hanson

Mailing Address 5622 Dorsey Drive

City State Zip Code  
Columbus OH 43235

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

Name of Employer Cardinal Health, Inc Occupation Dir, Mktg & Product Mgmt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 06 / 11 / 2010  
Transaction ID: 00714.C96897  
Amount of Each Receipt this Period: 50.00  
Receipt  
Payroll Deduction: (25.00- /Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 168.00

**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 20 / 48  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

**A.**

Full Name (Last, First, Middle Initial) Richard Heard		Date of Receipt MM / DD / YYYY 06 / 11 / 2010
Mailing Address 8106 Bulrush Canyon Trail Trail		Transaction ID: 00714.C96900
City Katy	State TX	Zip Code 77494
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Cardinal Health, Inc	Occupation Vp, Direct Sales Mgmt	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	Payroll Deduction: (25.00- /Bi-Weekly )

**B.**

Full Name (Last, First, Middle Initial) Jeffrey Henderson		Date of Receipt MM / DD / YYYY 06 / 11 / 2010
Mailing Address 347 Morgan Ln		Transaction ID: 00714.C96877
City Gahanna	State OH	Zip Code 43230
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
Name of Employer Cardinal Health, Inc	Occupation Chief Financial Officer	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	Payroll Deduction: (20.00- /Bi-Weekly )

**C.**

Full Name (Last, First, Middle Initial) Anthony Hunt		Date of Receipt MM / DD / YYYY 06 / 11 / 2010
Mailing Address 10208 Hollybrook Dr		Transaction ID: 00714.C96835
City Charlotte	State NC	Zip Code 28277
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 16.03
Name of Employer Cardinal Health, Inc	Occupation Vp, Account (strat Accts Ips)	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.47	Payroll Deduction: (16.03- /Bi-Weekly )

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	106.03
<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: PAGE 21 / 48  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC**

**A.** Full Name (Last, First, Middle Initial)  
 Anthony Hunt  
 Mailing Address 10208 Hollybrook Dr  
 City State Zip Code  
 Charlotte NC 28277  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cardinal Health, Inc Occupation Vp, Account (strat Accts Ips)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.66  
 Date of Receipt 06 / 28 / 2010  
**Transaction ID:** 00714.C97043  
 Amount of Each Receipt this Period 18.19  
 Receipt  
 Payroll Deduction: (18.19- /Bi-Weekly )

**B.** Full Name (Last, First, Middle Initial)  
 Martha Huston  
 Mailing Address 490 E. Sunburst Ln  
 City State Zip Code  
 Tempe AZ 85284  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cardinal Health, Inc Occupation Svp/gm, West Region  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 404.00  
 Date of Receipt 06 / 11 / 2010  
**Transaction ID:** 00714.C96966  
 Amount of Each Receipt this Period 100.00  
 Receipt  
 Payroll Deduction: (50.00- /Bi-Weekly )

**C.** Full Name (Last, First, Middle Initial)  
 Stephen Inacker  
 Mailing Address 1490 S Ridge Road  
 City State Zip Code  
 Lake Forest IL 60045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cardinal Health, Inc Occupation Pres, Medical Channel Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 456.30  
 Date of Receipt 06 / 11 / 2010  
**Transaction ID:** 00714.C96912  
 Amount of Each Receipt this Period 70.20  
 Receipt  
 Payroll Deduction: (35.10- /Bi-Weekly )

**SUBTOTAL** of Receipts This Page (optional) ..... ► 188.39  
**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 22 / 48  
(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
							17

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NAME OF COMMITTEE (In Full)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

**A.**

Full Name (Last, First, Middle Initial)  
Brian Jackson

Mailing Address 9055 Tartan Flds Dr

City State Zip Code  
Dublin OH 43017

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

Name of Employer Cardinal Health, Inc Occupation Svp, National Chain Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt 06 / 11 / 2010

Transaction ID: 00714.C96836

Amount of Each Receipt this Period 32.00

Receipt

Payroll Deduction: (16.00- /Bi-Weekly )

**B.**

Full Name (Last, First, Middle Initial)  
Stephen Johnson

Mailing Address 221 W Lancaster Ave # 2012 # 2012

City State Zip Code  
Fort Worth TX 76102

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

Name of Employer Cardinal Health, Inc Occupation Vp, Strategic Plng/execution

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 413.14

Date of Receipt 06 / 11 / 2010

Transaction ID: 00714.C96908

Amount of Each Receipt this Period 63.56

Receipt

Payroll Deduction: (31.78- /Bi-Weekly )

**C.**

Full Name (Last, First, Middle Initial)  
Kristina Kallmeyer

Mailing Address 3940 Village Club Drive

City State Zip Code  
Powell OH 43065

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

Name of Employer Cardinal Health, Inc Occupation Vp, Account (health Systems)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 11 / 2010

Transaction ID: 00714.C96884

Amount of Each Receipt this Period 40.00

Receipt

Payroll Deduction: (20.00- /Bi-Weekly )

**SUBTOTAL** of Receipts This Page (optional) ..... ► **135.56**

**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 23 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas Kapfer	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 1000 Ashley Ln	<b>Transaction ID:</b> 00714.C96967
	City State Zip Code Libertyville IL 60048	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Cardinal Health, Inc Occupation President, Category Mgmt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 321.00	Payroll Deduction: (50.00- /Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Kaufmann	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 7160 Temperance Point St Point St	<b>Transaction ID:</b> 00714.C96867
	City State Zip Code Westerville OH 43082	Amount of Each Receipt this Period 384.60
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Cardinal Health, Inc Occupation Ceo, Pharmaceutical Segment Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2499.90	Payroll Deduction: (192.3- 0/Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Kennedy	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 4783 Vista Ridge Dr	<b>Transaction ID:</b> 00714.C96815
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 200.60
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Cardinal Health, Inc Occupation Svp, Compliance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1303.90	Payroll Deduction: (100.3- 0/Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	685.20
<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 24 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Jill Lanouette	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 1 / 2 0 1 0
	Mailing Address 19 Old Farm Road	<b>Transaction ID:</b> 00714.C96845
	City State Zip Code Granville OH 43023	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Comm Business Partner	Payroll Deduction: (19.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Margaret Lavalle	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 1 / 2 0 1 0
	Mailing Address 9410 Culross Ct	<b>Transaction ID:</b> 00714.C96959
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Svp, Hr Services	Payroll Deduction: (50.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) David Lawrence	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 1 / 2 0 1 0
	Mailing Address 326 Vinwood Lane	<b>Transaction ID:</b> 00714.C96964
	City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Strategic Plng/execution	Payroll Deduction: (50.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>238.00</b>
<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 25 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Steve Lawrence	Date of Receipt 06 / 11 / 2010
	Mailing Address 4868 Carrigan Ridge	<b>Transaction ID:</b> 00714.C96813
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt Payroll Deduction: (100.0-0/Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Svp, Retail Independent Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Stuart Laws	Date of Receipt 06 / 11 / 2010
	Mailing Address 5635 Cypress Court	<b>Transaction ID:</b> 00714.C96853
	City State Zip Code Westerville OH 43082	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt Payroll Deduction: (19.00-/Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Svp, Chief Accounting Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Paul Leodler	Date of Receipt 06 / 11 / 2010
	Mailing Address 700 West Harbor Dr 505	<b>Transaction ID:</b> 00714.C96862
	City State Zip Code San Diego CA 92101	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt Payroll Deduction: (19.00-/Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Dir, Physical Security	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>276.00</b>
<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 26 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Linda Lockyer	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 1133 Noe Street	Transaction ID: 00714.C96928
	City State Zip Code San Francisco CA 94114	Amount of Each Receipt this Period 76.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Account (strat Accts Ips)	Payroll Deduction: (38.00- /Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Lynch	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 550 E Rosemary	Transaction ID: 00714.C96868
	City State Zip Code Lake Forest IL 60045	Amount of Each Receipt this Period 384.60
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Ceo, Medical Segment	Payroll Deduction: (192.3- 0/Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2499.90	

<b>C.</b>	Full Name (Last, First, Middle Initial) Donna Mann	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 6666 Mcvey Blvd	Transaction ID: 00714.C96902
	City State Zip Code West Worthington OH 43235	Amount of Each Receipt this Period 51.58
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Dir, Hr Service Delivery	Payroll Deduction: (25.79- /Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.27	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>512.18</b>
<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 27 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Lisa Marling-george	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 10502 Mackenzie Way	Transaction ID: 00714.C96847
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Hr Business Partners	Payroll Deduction: (19.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Marusa	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 38 Alpine Circle	Transaction ID: 00714.C96913
	City State Zip Code Sandy Hook CT 06482	Amount of Each Receipt this Period 76.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Direct Sales Mgmt	Payroll Deduction: (38.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 418.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jessica Mayer	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 4852 Carrigan Ridge	Transaction ID: 00714.C96906
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Bus Mgmt (atty)	Payroll Deduction: (30.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	174.00
<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: PAGE 28 / 48  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

**A.**

Full Name (Last, First, Middle Initial) Timothy Mcfadden		Date of Receipt MM / DD / YYYY 06 / 11 / 2010
Mailing Address 2 Beacon Hill Drive		Transaction ID: 00714.C96806
City Chester	State NJ	Zip Code 07930
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Cardinal Health, Inc	Occupation Evp, Sales & Marketing	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Payroll Deduction: (100.0- 0/Bi-Weekly )

**B.**

Full Name (Last, First, Middle Initial) Lindy Mclean		Date of Receipt MM / DD / YYYY 06 / 11 / 2010
Mailing Address 7272 Black Abbey Ct		Transaction ID: 00714.C96910
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 68.44
Name of Employer Cardinal Health, Inc	Occupation Sr Cnslt, Account	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 444.86	Payroll Deduction: (34.22- /Bi-Weekly )

**C.**

Full Name (Last, First, Middle Initial) Steven Merkin		Date of Receipt MM / DD / YYYY 06 / 11 / 2010
Mailing Address 1481 Country Ln		Transaction ID: 00714.C96945
City Deerfield	State IL	Zip Code 60015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer Cardinal Health, Inc	Occupation Svp, Hr Bus Partner Medical	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	Payroll Deduction: (40.00- /Bi-Weekly )

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>348.44</b>
<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 29 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Mone	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 4909 Scenic Creek Dr	Transaction ID: 00714.C96915
	City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 76.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Qra Mgmt	Payroll Deduction: (38.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Craig Morford	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 5565 Lake Shore Ave,	Transaction ID: 00714.C96866
	City State Zip Code Westerville OH 43082	Amount of Each Receipt this Period 384.60
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Chief Compliance/legal Officer	Payroll Deduction: (192.3- 0/Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2499.90	

<b>C.</b>	Full Name (Last, First, Middle Initial) Patricia Morrison	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 55 East Erie #3801	Transaction ID: 00714.C96958
	City State Zip Code Chicago IL 60611	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Evp, Cio	Payroll Deduction: (50.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	560.60
<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 30 / 48
	<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)  
**CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) Marc Mullen	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 1650 Sherborne Lane	<b>Transaction ID:</b> 00714.C96968
	City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Cardinal Health, Inc Occupation Svp, Gm Presource Aggregate Year-to-Date 650.00	Payroll Deduction: (50.00- /Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Frederick Nelson	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 7303 Deacon Court	<b>Transaction ID:</b> 00714.C96909
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 33.30
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Cardinal Health, Inc Occupation Vp, Op Excellence - Bb Prgm Aggregate Year-to-Date 456.76	Payroll Deduction: (33.30- /Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Frederick Nelson	Date of Receipt MM / DD / YYYY 06 / 28 / 2010
	Mailing Address 7303 Deacon Court	<b>Transaction ID:</b> 00714.C97154
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 40.60
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Cardinal Health, Inc Occupation Vp, Op Excellence - Bb Prgm Aggregate Year-to-Date 497.36	Payroll Deduction: (40.60- /Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>173.90</b>
<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 31 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Eric Norman	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 7170 Kingscote Ct.	<b>Transaction ID:</b> 00714.C96858
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt Payroll Deduction: (19.00- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Svp, Sales Ops And Hr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mark Overman	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 900 Wyndham Hill Ct	<b>Transaction ID:</b> 00714.C96839
	City State Zip Code Southlake TX 76092	Amount of Each Receipt this Period 36.26
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt Payroll Deduction: (18.13- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Vp, Account (health Systems)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.69	

<b>C.</b>	Full Name (Last, First, Middle Initial) William Owad	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 7558 Heatherwood Ln	<b>Transaction ID:</b> 00714.C96814
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 200.60
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt Payroll Deduction: (100.3- 0/Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Svp, Operational Excellence	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 509.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>274.86</b>
<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 32 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Angela Perkins		Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 615 N Beverly Lane		Transaction ID: 00714.C96963
	City Arlington Heights	State IL	Zip Code 60004
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Cardinal Health, Inc	Occupation Svp, Finance Medical	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	Payroll Deduction: (50.00- /Bi-Weekly )

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas Perrine		Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 7249 Landon Lane		Transaction ID: 00714.C96961
	City New Albany	State OH	Zip Code 43054
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Cardinal Health, Inc	Occupation Svp, Medical Segment It	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	Payroll Deduction: (50.00- /Bi-Weekly )

<b>C.</b>	Full Name (Last, First, Middle Initial) Vicki Perryman		Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 2000 Loch Lomond Drive		Transaction ID: 00714.C96886
	City Powell	State OH	Zip Code 43065
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer Cardinal Health, Inc	Occupation Svp, Customer Service	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	Payroll Deduction: (20.00- /Bi-Weekly )

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	240.00
<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: PAGE 33 / 48

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A.

Full Name (Last, First, Middle Initial)  
Carl Peterson

Mailing Address 2812 Parkhaven Dr

City State Zip Code  
Flower Mound TX 75022

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

Name of Employer Occupation  
Cardinal Health, Inc Vp, Account (health Systems)

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 494.00

Date of Receipt

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

Transaction ID: 00714.C96933

Amount of Each Receipt this Period

76.00

Receipt

Payroll Deduction: (38.00-  
/Bi-Weekly )

B.

Full Name (Last, First, Middle Initial)  
Aaron Pitts

Mailing Address 5014 Closeburn Ct

City State Zip Code  
Dublin OH 43017

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

Name of Employer Occupation  
Cardinal Health, Inc Svp, Strategy

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 394.22

Date of Receipt

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

Transaction ID: 00714.C96960

Amount of Each Receipt this Period

100.00

Receipt

Payroll Deduction: (50.00-  
/Bi-Weekly )

C.

Full Name (Last, First, Middle Initial)  
George Plava

Mailing Address 3526 Pembroke Dr

City State Zip Code  
Richmond TX 77469

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

Name of Employer Occupation  
Cardinal Health, Inc Vp, Sourcing Mgmt

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 899.99

Date of Receipt

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

Transaction ID: 00714.C96974

Amount of Each Receipt this Period

138.46

Receipt

Payroll Deduction: (69.23-  
/Bi-Weekly )

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

314.46

**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 34 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

**A.** Full Name (Last, First, Middle Initial)  
Paul Pogue

Mailing Address 8475 Shady Oaks Cove

City State Zip Code  
Olive Branch MS 38654

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

Name of Employer Cardinal Health, Inc      Occupation Dir, Account Mgmt

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt: 06 / 11 / 2010  
Transaction ID: 00714.C96856  
Amount of Each Receipt this Period: 38.00  
Receipt  
Payroll Deduction: (19.00- /Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Kathy Popejoy

Mailing Address 11127 W 59th Ave

City State Zip Code  
Arvada CO 80004

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

Name of Employer Cardinal Health, Inc      Occupation Dir, Operations Mgmt

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 308.88

Date of Receipt: 06 / 11 / 2010  
Transaction ID: 00714.C96894  
Amount of Each Receipt this Period: 47.52  
Receipt  
Payroll Deduction: (23.76- /Bi-Weekly)

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

Mailing Address 6650 Brodie Blvd  
4102

City State Zip Code  
Dublin OH 43017

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

Name of Employer Cardinal Health, Inc      Occupation Svp, Qra

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt: 06 / 11 / 2010  
Transaction ID: 00714.C96936  
Amount of Each Receipt this Period: 76.00  
Receipt  
Payroll Deduction: (38.00- /Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 161.52

**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 35 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

**A.** Full Name (Last, First, Middle Initial)  
John Rademacher  
Mailing Address 5006 Rosalind Lane  
City Powell State OH Zip Code 43065  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cardinal Health, Inc Occupation President, Nuclear & Pharmacy  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00  
Date of Receipt 06 / 11 / 2010  
Transaction ID: 00714.C96811  
Amount of Each Receipt this Period 200.00  
Receipt  
Payroll Deduction: (100.00/Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
William Rampy  
Mailing Address 103 Foxglove Ln  
City Bentonville State AR Zip Code 72712  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cardinal Health, Inc Occupation Vp, Mktg & Product Mgmt  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 681.07  
Date of Receipt 06 / 11 / 2010  
Transaction ID: 00714.C96970  
Amount of Each Receipt this Period 104.78  
Receipt  
Payroll Deduction: (52.39/Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Robert Randklev  
Mailing Address 2711 Pebble Stone  
City Grapevine State TX Zip Code 76051  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cardinal Health, Inc Occupation Svp/gm, Southwest Region  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00  
Date of Receipt 06 / 11 / 2010  
Transaction ID: 00714.C96892  
Amount of Each Receipt this Period 40.00  
Receipt  
Payroll Deduction: (20.00/Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 344.78  
**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 36 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen Reardon	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 9098 Mediterra Place	<b>Transaction ID:</b> 00714.C96876
	City State Zip Code Dublin OH 43016	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Qra Mgmt	Payroll Deduction: (20.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Cynthia Rhomberg	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 9379 Redan Court	<b>Transaction ID:</b> 00714.C96922
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 76.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Marketing Mgmt	Payroll Deduction: (38.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Frank Ridgway	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 11513 Tottenham Pl	<b>Transaction ID:</b> 00714.C96879
	City State Zip Code Richmond VA 23233	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Technical Sales	Payroll Deduction: (20.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	156.00
<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 37 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Keith Riecke	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 137 Cooperwyck Rd	<b>Transaction ID:</b> 00714.C96861
	City State Zip Code Wentzville MO 63385	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Cardinal Health, Inc Occupation Dir, It Mgmt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 247.00	Payroll Deduction: (19.00- /Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Daniel Robinson	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 8124 Crooked Oaks Ct	<b>Transaction ID:</b> 00714.C96930
	City State Zip Code Gainesville VA 20155	Amount of Each Receipt this Period 76.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Cardinal Health, Inc Occupation Vp, Pharmacy Operations Mgmt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 456.00	Payroll Deduction: (38.00- /Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Ernest Rogers	Date of Receipt MM / DD / YYYY 06 / 11 / 2010
	Mailing Address 105 Rhinestone Court	<b>Transaction ID:</b> 00714.C96931
	City State Zip Code Elizabethtown KY 42701	Amount of Each Receipt this Period 76.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Cardinal Health, Inc Occupation Vp, Customer Service Mgmt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 456.00	Payroll Deduction: (38.00- /Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	190.00
<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: PAGE 38 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

**A.** Full Name (Last, First, Middle Initial)  
Mark Rosenbaum

Mailing Address 144 Knollcrest Lane

City State Zip Code  
Rockwood TN 37854

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

Name of Employer Cardinal Health, Inc      Occupation Chief Customer Officer

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2499.90

Date of Receipt: 06 / 11 / 2010  
Transaction ID: 00714.C96870  
Amount of Each Receipt this Period: 384.60  
Receipt  
Payroll Deduction: (192.30/Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Cindy Roser

Mailing Address 5090 Pk Brooke Wkwy

City State Zip Code  
Alpharetta GA 30022

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

Name of Employer Cardinal Health, Inc      Occupation Svp/gm, Southeast Region

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt: 06 / 11 / 2010  
Transaction ID: 00714.C96956  
Amount of Each Receipt this Period: 100.00  
Receipt  
Payroll Deduction: (50.00/Bi-Weekly)

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

Mailing Address 8314 Davington Dr

City State Zip Code  
Dublin OH 43017

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

Name of Employer Cardinal Health, Inc      Occupation Vp, App Design & Devel

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt: 06 / 11 / 2010  
Transaction ID: 00714.C96914  
Amount of Each Receipt this Period: 76.00  
Receipt  
Payroll Deduction: (38.00/Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 560.60

**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 39 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Steven Seide		Date of Receipt
	Mailing Address 30 Nutmeg Ln		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	North Andover	MA	01845
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: 00714.C96840
Name of Employer Cardinal Health, Inc		Occupation Vp, Territory Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="240.76"/>	<input type="text" value="37.04"/>
			Receipt
			Payroll Deduction: (18.52- /Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Kendell Sherrer		Date of Receipt
	Mailing Address 7720 Heatherwood Ln		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Dublin	OH	43017
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: 00714.C96893
Name of Employer Cardinal Health, Inc		Occupation Vp, Hr Business Partners	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="261.43"/>	<input type="text" value="40.22"/>
			Receipt
			Payroll Deduction: (20.11- /Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Benn Sledge		Date of Receipt
	Mailing Address 8016 W 138th Terrace		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Overland Park	KS	66223
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: 00714.C96918
Name of Employer Cardinal Health, Inc		Occupation Vp, Account (strat Accts Ips)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="342.00"/>	<input type="text" value="76.00"/>
			Receipt
			Payroll Deduction: (38.00- /Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="153.26"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 40 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

**A.** Full Name (Last, First, Middle Initial)  
Taylor Smith

Mailing Address 1141 Old Colony Rd

City State Zip Code  
Lake Forest IL 60045

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

Name of Employer Cardinal Health, Inc      Occupation Svp, Gm Surgical Products

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt: 06 / 11 / 2010  
Transaction ID: 00714.C96855  
Amount of Each Receipt this Period: 38.00  
Receipt  
Payroll Deduction: (19.00- /Bi-Weekly )

**B.** Full Name (Last, First, Middle Initial)  
Rachel Stoll

Mailing Address 4228 Saint Andrews Blvd.

City State Zip Code  
Irving TX 75038

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

Name of Employer Cardinal Health, Inc      Occupation Vp, Account Mgmt

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt: 06 / 11 / 2010  
Transaction ID: 00714.C96859  
Amount of Each Receipt this Period: 38.00  
Receipt  
Payroll Deduction: (19.00- /Bi-Weekly )

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

Mailing Address 7703 E 85th St

City State Zip Code  
Tulsa OK 74133

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

Name of Employer Cardinal Health, Inc      Occupation Exec, Sales

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 259.61

Date of Receipt: 06 / 11 / 2010  
Transaction ID: 00714.C96827  
Amount of Each Receipt this Period: 14.81  
Receipt  
Payroll Deduction: (14.81- /Bi-Weekly )

**SUBTOTAL** of Receipts This Page (optional) ..... ► 90.81

**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 41 / 48
	<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Greg Storm		Date of Receipt
	Mailing Address 7703 E 85th St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 28 / 2010
	City	State	Zip Code
	Tulsa	OK	74133
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 00714.C97143
Name of Employer Cardinal Health, Inc		Occupation Exec, Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 299.47	<input type="text"/> 39.86
			Receipt
			Payroll Deduction: (39.86- /Bi-Weekly )

<b>B.</b>	Full Name (Last, First, Middle Initial) Peter Stoy		Date of Receipt
	Mailing Address 1955 Enclave Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 11 / 2010
	City	State	Zip Code
	Mt Pleasant	SC	29464
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 00714.C96919
Name of Employer Cardinal Health, Inc		Occupation Vp, Territory Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 456.00	<input type="text"/> 76.00
			Receipt
			Payroll Deduction: (38.00- /Bi-Weekly )

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert Summers		Date of Receipt
	Mailing Address 146 Chasely Circle		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 11 / 2010
	City	State	Zip Code
	Powell	OH	43065
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 00714.C96907
Name of Employer Cardinal Health, Inc		Occupation Vp, Marketing Mgmt	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 394.55	<input type="text"/> 60.70
			Receipt
			Payroll Deduction: (30.35- /Bi-Weekly )

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 176.56
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 48  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
**CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC**

**A.**

Full Name (Last, First, Middle Initial)  
Mary Jane Tew

Mailing Address 6315 Duffy Rd

City State Zip Code  
Delaware OH 43015

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

Name of Employer Cardinal Health, Inc Occupation Vp, Customer Service Mgmt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 06 / 11 / 2010

Transaction ID: 00714.C96935

Amount of Each Receipt this Period 76.00

Receipt

Payroll Deduction: (38.00- /Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Carole Watkins

Mailing Address 1967 Woodlands Place

City State Zip Code  
Powell OH 43065

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

Name of Employer Cardinal Health, Inc Occupation Chief Human Resource Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2499.90

Date of Receipt 06 / 11 / 2010

Transaction ID: 00714.C96869

Amount of Each Receipt this Period 384.60

Receipt

Payroll Deduction: (192.3- 0/Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Deborah Wolin

Mailing Address 44 Lake Mist Drive

City State Zip Code  
Sugar Land TX 77479

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

Name of Employer Cardinal Health, Inc Occupation Vp, Asc Gen Csl, Comm/trans

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 11 / 2010

Transaction ID: 00714.C96878

Amount of Each Receipt this Period 40.00

Receipt

Payroll Deduction: (20.00- /Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **500.60**

**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: PAGE 43 / 48  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

**A.**

Full Name (Last, First, Middle Initial)  
Anthony Woo

Mailing Address 6151 Haddo Way

City State Zip Code  
Dublin OH 43017

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

Name of Employer Cardinal Health, Inc Occupation Svp, Corp Devel, Fin Anl/val

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 11 / 2010

Transaction ID: 00714.C96889

Amount of Each Receipt this Period 40.00

Receipt

Payroll Deduction: (20.00- /Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Connie Woodburn

Mailing Address 9761 Erin Woods Dr

City State Zip Code  
Dublin OH 43017

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

Name of Employer Cardinal Health, Inc Occupation Svp, Prof & Govt Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1755.00

Date of Receipt 06 / 11 / 2010

Transaction ID: 00714.C96826

Amount of Each Receipt this Period 270.00

Receipt

Payroll Deduction: (135.0- /Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Brian Worth

Mailing Address 5654 Rothesay Drive

City State Zip Code  
Dublin OH 43017

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

Name of Employer Cardinal Health, Inc Occupation Svp, Hr Business Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 11 / 2010

Transaction ID: 00714.C96901

Amount of Each Receipt this Period 50.00

Receipt

Payroll Deduction: (25.00- /Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **360.00**

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

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

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

FOR LINE NUMBER: PAGE 44 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Benson Yang		Date of Receipt
	Mailing Address 15 Yew Court		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	San Rafael	CA	94903
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Cardinal Health, Inc		Occupation Vp, Direct Sales Mgmt	Transaction ID: 00714.C96925 Amount of Each Receipt this Period <input type="text" value="76.00"/> Receipt  Payroll Deduction: (38.00- /Bi-Weekly )
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="228.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="76.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="11058.53"/>

**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)

PAGE 45 / 48

<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)	Transaction ID: 00714.E1311 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 1 0
	Mailing Address 5915 Eastman Ave Ste 100 City Midland State MI Zip Code 48640-6824 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMP- AG) Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: ANNUAL/OTHER
Amount of Each Disbursement this Period 2500.00 DIRECT CONTRIBUTION	

<b>B.</b> Full Name (Last, First, Middle Initial) Grassley Committee	Transaction ID: 00608.E1307 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 0
	Mailing Address 521 E Locust St Fl 2 City Des Moines State IA Zip Code 50309-1943 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name CHARLES E GRASSLEY Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District: 00
Amount of Each Disbursement this Period 2000.00 DIRECT CONTRIBUTION	

<b>C.</b> Full Name (Last, First, Middle Initial) Guthrie for Congress	Transaction ID: 00714.E1315 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 0
	Mailing Address 700 12th St NW Ste 700 City Washington State DC Zip Code 20005-4052 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name STEVEN BRETT GUTHRIE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KY District: 02
Amount of Each Disbursement this Period 1000.00 DIRECT CONTRIBUTION	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln</p> <p>Mailing Address 303 Massachusetts Ave NE</p> <p>City Washington State DC Zip Code 20002-5701</p> <p>Purpose of Disbursement</p> <p>Candidate Name BLANCHE LAMBERT LINCOLN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2010 Run-off</p>	<p><b>Transaction ID:</b> 00608.E1306 <b>Date of Disbursement</b> 06 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ryan for Congress</p> <p>Mailing Address PO Box 1919</p> <p>City Janesville State WI Zip Code 53547-1919</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name PAUL D. RYAN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00608.E1308 <b>Date of Disbursement</b> 06 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>DIRECT CONTRIBUTION</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tim Ryan for Congress</p> <p>Mailing Address PO Box 75214</p> <p>City Washington State DC Zip Code 20013-0214</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name TIMOTHY J. RYAN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 17</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 00608.E1309 <b>Date of Disbursement</b> 06 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>DIRECT CONTRIBUTION</p>

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

4000.00

**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)

PAGE 47 / 48

<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)  
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Volunteers for Shimkus <hr/> Mailing Address 700 12th Street, NW Suite 700 <hr/> City Washington State DC Zip Code 20005- <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name JOHN M SHIMKUS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 19 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00714.E1312 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 2000.00 <hr/> DIRECT CONTRIBUTION
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Zack Space for Congress <hr/> Mailing Address PO Box 75214 <hr/> City Washington State DC Zip Code 20013-0214 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name ZACHARY T SPACE <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00714.E1314 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 2500.00 <hr/> DIRECT CONTRIBUTION
	Category/ Type

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

4500.00

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

14000.00

**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)

PAGE 48 / 48

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A.

Full Name (Last, First, Middle Initial)  
Committee to Elect Chris Widener

Mailing Address 23 S Center St

City Springfield State OH Zip Code 45502-1201

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 00714.E1313

Date of Disbursement

06 / 24 / 2010

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

1000.00