

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		191856.82
(b) Cash on Hand at Beginning of Reporting Period.....	182923.14	
(c) Total Receipts (from Line 19)	31108.64	196692.85
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	214031.78	388549.67
7. Total Disbursements (from Line 31).....	12100.00	186617.89
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	201931.78	201931.78
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	27541.19	123533.71
(ii) Unitemized	3533.60	69369.78
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	31074.79	192903.49
(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)	31074.79	192903.49
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	3500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	33.85	289.36
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	31108.64	196692.85
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	31108.64	196692.85

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12100.00	132600.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	17.89
(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	17.89
29. Other Disbursements	0.00	54000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12100.00	186617.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12100.00	186617.89

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	31074.79	192903.49
34. Total Contribution Refunds (from Line 28(d))	0.00	17.89
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31074.79	192885.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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 AKA Cardinal Health Companies PAC

A. OLA M SNOW
 Full Name (Last, First, Middle Initial)
 Mailing Address 267 DONERAIL AVE
 City State Zip Code
 POWELL OH 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC SVP, HR BUS PARTNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR10055346817
 Amount of Each Receipt this Period
 150.00
 P/R Deduction (\$50.00 Bi-Weekly)

B. KELLI M KOVAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 195 N HARBOR DR #802
 City State Zip Code
 CHICAGO IL 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, STRATEGY MGMT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 456.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR11742636817
 Amount of Each Receipt this Period
 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

C. PAUL R LEODLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 8696 NW ANDERSON HILL RD
 City State Zip Code
 SILVERDALE WA 98383
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC DIR, PHYSICAL SECURI
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR7800616817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 321.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 102
<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 AKA Cardinal Health Companies PAC

A. ROBERT F F GLOVER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5633 N KOSTNER AVENUE
 City CHICAGO State IL Zip Code 60646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, ACCOUNT (HEALTH)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8737746817
 Amount of Each Receipt this Period 75.00
 P/R Deduction (\$25.00 Bi-Weekly)

B. THOMAS E E HUNT
 Full Name (Last, First, Middle Initial)
 Mailing Address 8093 WILDWOOD LANE
 City DARIEN State IL Zip Code 60561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation EXEC, ACCOUNT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8737756817
 Amount of Each Receipt this Period 75.00
 P/R Deduction (\$25.00 Bi-Weekly)

C. TONY SZADO
 Full Name (Last, First, Middle Initial)
 Mailing Address 5342 S LEWISTON CT
 City CENTENNIAL State CO Zip Code 80015
 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 ▼ 323.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8737766817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	207.00
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 8 OF 102
(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 AKA Cardinal Health Companies PAC

A. MARK R OVERMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 WYNDHAM HILL CT
 City SOUTHLAKE State TX Zip Code 76092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, ACCOUNT (HEALTH)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 346.86

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR873776817
 Amount of Each Receipt this Period
 57.81
 P/R Deduction (\$19.27 Bi-Weekly)

B. LINDA S LOCKYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1133 NOE STREET
 City SAN FRANCISCO State CA Zip Code 94114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, ACCOUNT (HEALTH)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 684.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR873776817
 Amount of Each Receipt this Period
 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

C. RONALD A A DEDELS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1080 BIG WATER POINT
 City GREENSBORO State GA Zip Code 30642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, SALES OPERATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8737806817
 Amount of Each Receipt this Period
 90.00
 P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 261.81
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 9 OF 102
	<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 AKA Cardinal Health Companies PAC

A. LOIS A BARRETT
Full Name (Last, First, Middle Initial)

Mailing Address 6165 HAZELWOOD AVE

City INDIANAPOLIS State IN Zip Code 46228

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

Name of Employer: CARDINAL HEALTH, INC Occupation: VP, SALES OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **646.00**

Date of Receipt: 08 / 31 / 2013
Transaction ID : PR8737816817

Amount of Each Receipt this Period: **114.00**

P/R Deduction (\$38.00 Bi-Weekly)

B. MARK T HENDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 6308 MCCOY

City SHAWNEE State KS Zip Code 66226

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 ▼ **262.65**

Date of Receipt: 08 / 31 / 2013
Transaction ID : PR8737876817

Amount of Each Receipt this Period: **46.35**

P/R Deduction (\$15.45 Bi-Weekly)

C. ANTHONY J J CAPRIO
Full Name (Last, First, Middle Initial)

Mailing Address 6 COTTAGE LANE

City MARLBORO State NJ Zip Code 07746

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

Name of Employer: CARDINAL HEALTH, INC Occupation: EVP, SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1800.00**

Date of Receipt: 08 / 31 / 2013
Transaction ID : PR8737936817

Amount of Each Receipt this Period: **300.00**

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

SUBTOTAL of Receipts This Page (optional).....	460.35
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 10 OF 102
(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 AKA Cardinal Health Companies PAC

A. KATHY S POPEJOY
 Full Name (Last, First, Middle Initial)
 Mailing Address 11127 W 59TH AVE
 City ARVADA State CO Zip Code 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 ▼ 460.08

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8737946817
 Amount of Each Receipt this Period 76.68
 P/R Deduction (\$25.56 Bi-Weekly)

B. FREDERICK D CK D NELSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 7303 DEACON COURT
 City DUBLIN State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, ACCOUNT (STRAT A)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 745.56

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8737966817
 Amount of Each Receipt this Period 124.26
 P/R Deduction (\$41.42 Bi-Weekly)

C. CHRISTOPHER J PHER J ANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3600 GEORGE PIERCE
 City SUWANEE State GA Zip Code 30024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, QRA MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8737996817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 257.94
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 102
	<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 AKA Cardinal Health Companies PAC

A. LISA A ASHBY
Full Name (Last, First, Middle Initial)

Mailing Address 605 MUIRFIELD CT

City AUGUSTA State GA Zip Code 30907

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

Name of Employer: CARDINAL HEALTH, INC Occupation: PRES, MED DEVICE & D

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 08 / 31 / 2013
Transaction ID : PR8738006817

Amount of Each Receipt this Period: 150.00

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

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

Mailing Address 30121 FIDDLERS GREEN

City FARMINGTON HILLS State MI Zip Code 48334

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 ▼ 243.00

Date of Receipt: 08 / 31 / 2013
Transaction ID : PR8738016817

Amount of Each Receipt this Period: 40.50

P/R Deduction (\$13.50 Bi-Weekly)

C. DOUGLAS J J KATZ
Full Name (Last, First, Middle Initial)

Mailing Address 20 MCCUE RD

City MORGANVILLE State NJ Zip Code 07751

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

Name of Employer: CARDINAL HEALTH, INC Occupation: VP, TERRITORY SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt: 08 / 31 / 2013
Transaction ID : PR8738026817

Amount of Each Receipt this Period: 57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 247.50

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 102
<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 AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial) A. HARRY T VAIL		Date of Receipt 08 / 31 / 2013 Transaction ID : PR8738046817
Mailing Address 2693 FOX RIVER LN		Amount of Each Receipt this Period 57.00
City NAPERVILLE	State IL	Zip Code 60565
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation VP, ACCOUNT MGMT (PR)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	

Full Name (Last, First, Middle Initial) B. DAVID B RENDER		Date of Receipt 08 / 31 / 2013 Transaction ID : PR8738096817
Mailing Address 6909 MARIS CT		Amount of Each Receipt this Period 42.93
City BURLESON	State TX	Zip Code 76028
FEC ID number of contributing federal political committee. C		P/R Deduction (\$14.31 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation DIR, OPERATIONS MGMT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.58	

Full Name (Last, First, Middle Initial) C. JAMES A WHIDDEN		Date of Receipt 08 / 31 / 2013 Transaction ID : PR8738106817
Mailing Address 10 CHERRY LANE		Amount of Each Receipt this Period 57.00
City CHESTER	State NY	Zip Code 10918
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation DIR, QRA MGMT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	

SUBTOTAL of Receipts This Page (optional).....▶	156.93
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 102
	<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 AKA Cardinal Health Companies PAC

A. ROBERT M M RANDKLEV
 Full Name (Last, First, Middle Initial)
 Mailing Address 4708 MEANDERING WAY
 City COLLEYVILLE State TX Zip Code 76034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, HSS OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738116817
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

B. GEOFFREY Y Y Y MCMAHON
 Full Name (Last, First, Middle Initial)
 Mailing Address 57-531 KAMEHAMEHA HWY
 City KAHUKU State HI Zip Code 96731
 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 ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738126817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. BENJAMIN T N T THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2029 LEWIS CROSSING COURT
 City KELLER State TX Zip Code 76248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation NVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 684.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738146817
 Amount of Each Receipt this Period 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	231.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 102
<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 AKA Cardinal Health Companies PAC

A. DONALD R R HOWARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1848 OVERLOOK DRIVE
 City MOUNT DORA State FL Zip Code 32757
 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 ▼ 270.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738166817
 Amount of Each Receipt this Period 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

B. LAUREL BEELER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1723 EAGLE TRL
 City OXFORD State MI Zip Code 48371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation EXEC, ACCOUNT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738206817
 Amount of Each Receipt this Period 75.00
 P/R Deduction (\$25.00 Bi-Weekly)

C. DAVID A GOLDSBERRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 321 ST ANDREWS LN
 City GURNEE State IL Zip Code 60031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, DIRECT SALES MGM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 684.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738216817
 Amount of Each Receipt this Period 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	234.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 102
	<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 AKA Cardinal Health Companies PAC

A. DANIEL L L SWANBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 3648 TIERRA PARIS
 City EL PASO State TX Zip Code 79938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, ENGINEERING MGM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8738226817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. MICHAEL L L GROESBECK
 Full Name (Last, First, Middle Initial)
 Mailing Address 33916 N SUMMERFIELDS DR
 City GURNEE State IL Zip Code 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 ▼ 720.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8738236817
 Amount of Each Receipt this Period 120.00
 P/R Deduction (\$40.00 Bi-Weekly)

C. DEBRA L SCHOTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 2351 THORNWOOD AVENUE
 City WILMETTE State IL Zip Code 60091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, GM PERIOPERATIV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8738276817
 Amount of Each Receipt this Period 150.00
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	327.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 102
<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 AKA Cardinal Health Companies PAC

A. GREGG A BREWSTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 3710 FENCELINE ROAD
 City FRANKSVILLE State WI Zip Code 53126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, ACCOUNT (HEALTH)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8738286817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. MICHELE B B DONATICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 520 PENNY LANE
 City GRAYSLAKE State IL Zip Code 60030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, CUSTOMER ADVOCA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 248.94

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8738306817
 Amount of Each Receipt this Period 41.49
 P/R Deduction (\$13.83 Bi-Weekly)

C. FRANK E RIDGWAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 11513 TOTTENHAM PL
 City RICHMOND State VA Zip Code 23233
 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 ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8738326817
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	158.49
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

A. GREG W STORM
Full Name (Last, First, Middle Initial)

Mailing Address 123 CHALLAIN DRIVE

City LITTLE ROCK State AR Zip Code 72223-5517

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 ▼ 500.22

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738346817

Amount of Each Receipt this Period 71.23

P/R Deduction (\$15.98 Bi-Weekly)

B. STEPHEN A A INACKER
Full Name (Last, First, Middle Initial)

Mailing Address 1490 S RIDGE ROAD

City LAKE FOREST State IL Zip Code 60045

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

Name of Employer CARDINAL HEALTH, INC Occupation PRES, HOSPITAL SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 681.84

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738356817

Amount of Each Receipt this Period 113.64

P/R Deduction (\$37.88 Bi-Weekly)

C. WILFRIDO M O M SOSA
Full Name (Last, First, Middle Initial)

Mailing Address 721 LIVE OAK

City EL PASO State TX Zip Code 79932

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, MANUFACTURING MG

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738416817

Amount of Each Receipt this Period 57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 241.87

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 102
	<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 AKA Cardinal Health Companies PAC

A. SUSAN J JACOBSON
Full Name (Last, First, Middle Initial)

Mailing Address 65 EAST MONROE #4606

City CHICAGO State IL Zip Code 60603

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

Name of Employer CARDINAL HEALTH, INC Occupation SVP, GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 684.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738456817

Amount of Each Receipt this Period 114.00

P/R Deduction (\$38.00 Bi-Weekly)

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

Mailing Address 215 N. PINE STREET UNIT 3903

City CHARLOTTE State NC Zip Code 28202

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, ACCOUNT (HEALTH)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738466817

Amount of Each Receipt this Period 57.00

P/R Deduction (\$19.00 Bi-Weekly)

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

Mailing Address 3333 HAWKS RIDGE DR

City LAKELAND State FL Zip Code 33810

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 ▼ 360.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738486817

Amount of Each Receipt this Period 60.00

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

SUBTOTAL of Receipts This Page (optional)..... ▶ 231.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

A. MICHAEL M M SINIGAGLIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 57 WILLETS DR
 City SYOSSET State NY Zip Code 11791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8738506817
 Amount of Each Receipt this Period 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

B. KATE C SPIRKO
 Full Name (Last, First, Middle Initial)
 Mailing Address 6812 SPRUCE PINE DR
 City COLUMBUS State OH Zip Code 43235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, MERGER INTEGRATI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 684.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8738516817
 Amount of Each Receipt this Period 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

C. RACHEL R R STOLL
 Full Name (Last, First, Middle Initial)
 Mailing Address 420 WAKEFIELD BLUFF COURT
 City ALPHARETTA State GA Zip Code 30004
 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 ▼ 532.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8738536817
 Amount of Each Receipt this Period 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	273.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 102
	<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 AKA Cardinal Health Companies PAC

A. STACY SEPTER
Full Name (Last, First, Middle Initial)
Mailing Address 18 MILLER DRIVE

City SYLACAUGA	State AL	Zip Code 35151
-------------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation EXEC, ACCOUNT
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8738566817

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

B. JAMES H HORNER
Full Name (Last, First, Middle Initial)
Mailing Address 2706 ISLAND COVE ROAD

City FORT MILL	State SC	Zip Code 29708
-------------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation DIR, MANUFACTURING M
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8738596817

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

C. PAUL S POGUE
Full Name (Last, First, Middle Initial)
Mailing Address 1174 GREERS LANDING DR

City HERNANDO	State MS	Zip Code 38632
------------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation DIR, MKTG & PRODUCT
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8738606817

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	171.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 102
<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 AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial) A. BRENDA G G BARDEN		Date of Receipt 08 / 31 / 2013 Transaction ID : PR8738616817
Mailing Address 3435 ALTA VISTA DR		Amount of Each Receipt this Period 57.00
City CHATTANOOGA	State TN	Zip Code 37411
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation DIR, ACCOUNT MGMT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	

Full Name (Last, First, Middle Initial) B. DANNY W PENNY		Date of Receipt 08 / 31 / 2013 Transaction ID : PR8738646817
Mailing Address 27 N LAKE AVE		Amount of Each Receipt this Period 57.00
City THIRD LAKE	State IL	Zip Code 60030
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation DIR, PACKAGING ENGR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	

Full Name (Last, First, Middle Initial) C. JAY C GREER		Date of Receipt 08 / 31 / 2013 Transaction ID : PR8738656817
Mailing Address 1472 MILL RACE		Amount of Each Receipt this Period 57.00
City ROCHESTER HILLS	State MI	Zip Code 48306
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation VP, ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	

SUBTOTAL of Receipts This Page (optional).....▶	171.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 102
	<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 AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)
A. MARK MISPLAY

Mailing Address 1811 WINDY HILL LANE

City PROSPER State TX Zip Code 75078

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

Name of Employer Occupation
CARDINAL HEALTH, INC VP, ACCOUNT MGMT (AM)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt
08 / 31 / 2013
Transaction ID : PR873866817

Amount of Each Receipt this Period
57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. MATT J KOHUT

Mailing Address 809 EAST ROCKLAND RD

City LIBERTYVILLE State IL Zip Code 60048

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

Name of Employer Occupation
CARDINAL HEALTH, INC SVP, MEDICAL DEVICE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **234.00**

Date of Receipt
08 / 31 / 2013
Transaction ID : PR8738676817

Amount of Each Receipt this Period
39.00

P/R Deduction (\$13.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. CURTIS L L WILENS

Mailing Address 1347 COVENTRY LN

City NORTHBROOK State IL Zip Code 60062

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

Name of Employer Occupation
CARDINAL HEALTH, INC DIR, MARKETING RESEA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt
08 / 31 / 2013
Transaction ID : PR8738686817

Amount of Each Receipt this Period
57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **153.00**

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 23 OF 102
(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 AKA Cardinal Health Companies PAC

A. TAYLOR H H SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 1141 OLD COLONY RD
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, GM ORTHOPEDIC S
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 323.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738696817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. JOHN W SAFFORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2130 W NORTH AVE #302
 City CHICAGO State IL Zip Code 60622
 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 ▼ 252.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738716817
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

C. SCOTT A DONNELLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 12195 ANDREWS DRIVE
 City PLAIN CITY State OH Zip Code 43064
 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 ▼ 360.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738756817
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 159.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 102
<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 AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial) A. ROBERT MOULTON		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8738766817
Mailing Address 7017 VIOLET VEIL		Amount of Each Receipt this Period 57.00
City DUBLIN	State OH	Zip Code 43016
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation DIR, FINANCE (GENERA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	

Full Name (Last, First, Middle Initial) B. JOSEPH L L BOURQUE		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8738776817
Mailing Address 18 BUSH HILL RD		Amount of Each Receipt this Period 57.00
City IPSWICH	State MA	Zip Code 01938
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation DIR, TERRITORY SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	

Full Name (Last, First, Middle Initial) C. STEPHEN REARDON		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8738786817
Mailing Address 9098 MEDITERRA PLACE		Amount of Each Receipt this Period 60.00
City DUBLIN	State OH	Zip Code 43016
FEC ID number of contributing federal political committee. C		P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation VP, QRA MGMT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional).....▶	174.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 102
	<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 AKA Cardinal Health Companies PAC

A. PAUL G FARLEY
Full Name (Last, First, Middle Initial)

Mailing Address 52 ONONDEGA RD

City NARRAGANSETT State RI Zip Code 02882

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, ACCOUNT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738806817

Amount of Each Receipt this Period 57.00

P/R Deduction (\$19.00 Bi-Weekly)

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

Mailing Address 21614 CANYON FOREST CT

City KATY State TX Zip Code 77450

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

Name of Employer CARDINAL HEALTH, INC Occupation DIR, FIN PLNG & ANAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738826817

Amount of Each Receipt this Period 57.00

P/R Deduction (\$19.00 Bi-Weekly)

C. PATRICK J J ECKHERT
Full Name (Last, First, Middle Initial)

Mailing Address 4685 SEVEN LAKES PL

City POWELL State OH Zip Code 43065

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

Name of Employer CARDINAL HEALTH, INC Occupation DIR, STRATEGIC SOURC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738836817

Amount of Each Receipt this Period 57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 171.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 102
<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 AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial) A. RENE BLOCH		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8738846817
Mailing Address 401 SPRING DRIVE		Amount of Each Receipt this Period 114.00
City YORKTOWN HEIGHTS	State NY	Zip Code 10598
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation EXEC TERRITORY SALES
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 684.00	P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. ANNLEA C C RUMFOLA		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8738856817
Mailing Address 8314 DAVINGTON DR		Amount of Each Receipt this Period 114.00
City DUBLIN	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation VP, SOFTWARE ENGINEER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 684.00	P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. JOHN A FIACCO		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8738866817
Mailing Address 124 FOX HAVEN DRIVE		Amount of Each Receipt this Period 114.00
City O'FALLON	State MO	Zip Code 63368
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation VP, PHARM OPS MGMT -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 684.00	P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	342.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 102
	<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 AKA Cardinal Health Companies PAC

A. MICHAEL D D SYNOR
Full Name (Last, First, Middle Initial)

Mailing Address 31772 FAIRWAY DR N

City FORISTELL State MO Zip Code 63348

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

Name of Employer CARDINAL HEALTH, INC Occupation DIR, TERRITORY SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR873886817

Amount of Each Receipt this Period 57.00

P/R Deduction (\$19.00 Bi-Weekly)

B. ERIC D SUTHERLAND
Full Name (Last, First, Middle Initial)

Mailing Address 6433 TULIPWOOD LANE

City JAMESVILLE State NY Zip Code 13078

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 ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738906817

Amount of Each Receipt this Period 57.00

P/R Deduction (\$19.00 Bi-Weekly)

C. KRISTINA M A M ROBINSON
Full Name (Last, First, Middle Initial)

Mailing Address 5464 HEATHROW DRIVE

City POWELL State OH Zip Code 43065

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

Name of Employer CARDINAL HEALTH, INC Occupation DIR, RESEARCH PROJEC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.88

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8738916817

Amount of Each Receipt this Period 40.98

P/R Deduction (\$13.66 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 154.98

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 28 OF 102
	<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 AKA Cardinal Health Companies PAC

A. ANDRE D SMITH
Full Name (Last, First, Middle Initial)

Mailing Address 2514 BLUE WATER BAY DR

City KATY	State TX	Zip Code 77494
--------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation DIR, PHARM OPS & ACC
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8738936817

Amount of Each Receipt this Period

342.00

57.00

P/R Deduction (\$19.00 Bi-Weekly)

B. TED L DIBIASE
Full Name (Last, First, Middle Initial)

Mailing Address 4954 ROSEGATE COURT

City DUBLIN	State OH	Zip Code 43017
----------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation VP, ORG HEALTH & LAB
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1101.60**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8738946817

Amount of Each Receipt this Period

1101.60

183.60

P/R Deduction (\$61.20 Bi-Weekly)

C. JOSHUA T T GAINES
Full Name (Last, First, Middle Initial)

Mailing Address 5721 CLOVER LANE

City WESTERVILLE	State OH	Zip Code 43081
---------------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation SVP, STRATEGY & CORP
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **522.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8738966817

Amount of Each Receipt this Period

522.00

87.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	327.60
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 29 OF 102
	<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 AKA Cardinal Health Companies PAC

A. STEPHEN FLANNERY
Full Name (Last, First, Middle Initial)

Mailing Address 275 EAST CENTER ST

City SHAVERTOWN State PA Zip Code 18708

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, ACCOUNT (HEALTH)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 434.38

Date of Receipt 08 / 31 / 2013
Transaction ID : PR873896817

Amount of Each Receipt this Period 63.24

P/R Deduction (\$21.08 Bi-Weekly)

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

Mailing Address 4871 NORMANDY DRIVE

City GALENA State OH Zip Code 43021

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, MKTG & PRODUCT M

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR873896817

Amount of Each Receipt this Period 57.00

P/R Deduction (\$19.00 Bi-Weekly)

C. GEORGE J J PLAVA
Full Name (Last, First, Middle Initial)

Mailing Address 3526 PEMBROOKE DR

City RICHMOND State TX Zip Code 77406

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, PHARM OPS & ACCO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1246.14

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739036817

Amount of Each Receipt this Period 207.69

P/R Deduction (\$69.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 327.93

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 30 OF 102
<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 AKA Cardinal Health Companies PAC

A. ROBERT S S SUMMERS
Full Name (Last, First, Middle Initial)
Mailing Address 146 CHASELY CIRCLE

City POWELL	State OH	Zip Code 43065
----------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation DIR, MKTG & PRODUCT
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **546.30**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8739056817

Amount of Each Receipt this Period

91.05

P/R Deduction (\$30.35 Bi-Weekly)

B. NATASHA C C NICOL
Full Name (Last, First, Middle Initial)
Mailing Address 35 RED TAIL HAWK LOOP

City PAWLEYS ISLAND	State SC	Zip Code 29585
------------------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation DIR, CLINICAL SPEC -
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8739066817

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

C. SEAN M MCCAFFREY
Full Name (Last, First, Middle Initial)
Mailing Address 1020 BUCK RUN RD

City SOUTHPOINTE	State PA	Zip Code 15317
---------------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation VP, OPERATIONS MGMT
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **684.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8739076817

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	262.05
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 31 OF 102
	<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 AKA Cardinal Health Companies PAC

A. DEBORAH E E WOLIN
Full Name (Last, First, Middle Initial)

Mailing Address 44 LAKE MIST DRIVE

City SUGAR LAND State TX Zip Code 77479

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, ASC GEN CSL, COM

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739086817

Amount of Each Receipt this Period 60.00

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

B. STEVEN J J CALLISON
Full Name (Last, First, Middle Initial)

Mailing Address 1368 LINCOLN ROAD

City COLUMBUS State OH Zip Code 43212

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, SOFTWARE ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 338.58

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739096817

Amount of Each Receipt this Period 56.43

P/R Deduction (\$18.81 Bi-Weekly)

C. RONALD M M WADSWORTH
Full Name (Last, First, Middle Initial)

Mailing Address 4310 SUFFOLK WAY

City EL DORADO HILLS State CA Zip Code 95762

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, OPERATIONS MGMT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739106817

Amount of Each Receipt this Period 45.00

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

SUBTOTAL of Receipts This Page (optional).....▶ 161.43

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 32 OF 102
(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 AKA Cardinal Health Companies PAC

A. DEBORAH BROWN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3204 STONEBRIDGE TR
 City VALRICO State FL Zip Code 33596
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, HEALTH SYSTEM P
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739176817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. GARY G CACCIATORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3810 LOCH GLEN CT
 City HOUSTON State TX Zip Code 77059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, ASC GEN CSL, REG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.50

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739196817
 Amount of Each Receipt this Period 111.75
 P/R Deduction (\$37.25 Bi-Weekly)

C. RICHARD F F COLLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2903 21ST AVE CT SE
 City PUYALLUP State WA Zip Code 98372-1712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation EXEC, ACCOUNT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739206817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.75
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 33 OF 102
	<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 AKA Cardinal Health Companies PAC

A. JAMES L SCOTT
Full Name (Last, First, Middle Initial)

Mailing Address 9318 PRATOLINA VILLA DRIVE

City DUBLIN	State OH	Zip Code 43016
----------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation SVP, NATIONAL MARKET
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8739226817

Amount of Each Receipt this Period

150.00

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

B. BRADLEY G G COCHRAN
Full Name (Last, First, Middle Initial)

Mailing Address 2589 AIKIN CIRCLE S

City LEWIS CENTER	State OH	Zip Code 43035
----------------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation VP, ACCOUNT
--	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **684.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8739246817

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

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

Mailing Address 7558 HEATHERWOOD LN

City DUBLIN	State OH	Zip Code 43017
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FEC ID number of contributing federal political committee. **C**

Name of Employer CARDINAL HEALTH, INC	Occupation SVP, OPERATIONAL EXC
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1805.40**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8739256817

Amount of Each Receipt this Period

300.90

P/R Deduction (\$100.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	564.90
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 34 OF 102
<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 AKA Cardinal Health Companies PAC

A. LISA A STILLINGS
Full Name (Last, First, Middle Initial)
Mailing Address 5833 WHITECRAIGS CT
City DUBLIN State OH Zip Code 43017
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation DIR, FIN PLNG & ANAL
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739296817
Amount of Each Receipt this Period 57.00
P/R Deduction (\$19.00 Bi-Weekly)

B. JEFFREY B B BRANNON
Full Name (Last, First, Middle Initial)
Mailing Address 3965 CLEARLAKE CIRCL
City ZANESVILLE State OH Zip Code 43701
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, ACCOUNT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739306817
Amount of Each Receipt this Period 75.00
P/R Deduction (\$25.00 Bi-Weekly)

C. CRAIG P COWMAN
Full Name (Last, First, Middle Initial)
Mailing Address 6851 KILLILEA DRIVE
City DUBLIN State OH Zip Code 43017
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation SVP, PRODUCT MANAGEM
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739316817
Amount of Each Receipt this Period 150.00
P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 282.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 102
	<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 AKA Cardinal Health Companies PAC

A. LORI S HAVLOVITZ
Full Name (Last, First, Middle Initial)

Mailing Address 8969 SUNNINGDALE LANE

City DUBLIN State OH Zip Code 43017

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, IT MGMT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt **08 / 31 / 2013**

Transaction ID : PR8739326817

Amount of Each Receipt this Period **57.00**

P/R Deduction (\$19.00 Bi-Weekly)

B. TRACY K GODFREY
Full Name (Last, First, Middle Initial)

Mailing Address 1215 POLARIS PARKWAY # 175

City COLUMBUS State OH Zip Code 43240

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

Name of Employer CARDINAL HEALTH, INC Occupation DIR, STRATEGIC PRICI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt **08 / 31 / 2013**

Transaction ID : PR8739336817

Amount of Each Receipt this Period **57.00**

P/R Deduction (\$19.00 Bi-Weekly)

C. MARK D ZAWADZKI
Full Name (Last, First, Middle Initial)

Mailing Address 5991 KITCHEN CT

City HILLIARD State OH Zip Code 43026

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, FINANCE (GENERAL)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt **08 / 31 / 2013**

Transaction ID : PR8739346817

Amount of Each Receipt this Period **60.00**

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

SUBTOTAL of Receipts This Page (optional)..... **174.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 102
<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 AKA Cardinal Health Companies PAC

A. MARGARET M T M LAVALLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 9410 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 SVP, HR SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739356817
 Amount of Each Receipt this Period 150.00
 P/R Deduction (\$50.00 Bi-Weekly)

B. JOSEPH S S HODGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2260 GNARLED PINE DRIVE
 City DUBLIN State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation EXEC, ACCOUNT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739366817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. MICHAEL C C KAUFMANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7160 TEMPERANCE POINT ST
 City WESTERVILLE State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation CEO, PHARMACEUTICAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3461.40

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739386817
 Amount of Each Receipt this Period 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	783.90
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 37 OF 102
	<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 AKA Cardinal Health Companies PAC

A. GREGORY BOGGS
Full Name (Last, First, Middle Initial)

Mailing Address 7746 POLO LANE

City State Zip Code
POWELL OH 43065

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

Name of Employer Occupation
CARDINAL HEALTH, INC VP, SOFTWARE ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt
08 / 31 / 2013
Transaction ID : PR8739396817

Amount of Each Receipt this Period
57.00

P/R Deduction (\$19.00 Bi-Weekly)

B. ANGELA M M THOMAS
Full Name (Last, First, Middle Initial)

Mailing Address 9287 WINDY CREEK DR

City State Zip Code
COLUMBUS OH 43240

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

Name of Employer Occupation
CARDINAL HEALTH, INC VP, INVENTORY MGMT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
08 / 31 / 2013
Transaction ID : PR8739406817

Amount of Each Receipt this Period
60.00

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

C. AMY P SNOW
Full Name (Last, First, Middle Initial)

Mailing Address 5760 WHITECRAIGS CT

City State Zip Code
DUBLIN OH 43017

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

Name of Employer Occupation
CARDINAL HEALTH, INC EXEC, ACCOUNT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt
08 / 31 / 2013
Transaction ID : PR8739416817

Amount of Each Receipt this Period
57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **174.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 102
	<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 AKA Cardinal Health Companies PAC

A. PETER A STOY
Full Name (Last, First, Middle Initial)
Mailing Address 1955 ENCLAVE DRIVE
City MT PLEASANT State SC Zip Code 29464
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 ▼ 646.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739426817
Amount of Each Receipt this Period 114.00
P/R Deduction (\$38.00 Bi-Weekly)

B. LAURA L SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 5828 IVY BRANCH DR
City DUBLIN State OH Zip Code 43016
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation DIR, SALES OPERATION
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739466817
Amount of Each Receipt this Period 57.00
P/R Deduction (\$19.00 Bi-Weekly)

C. KEVIN M KANNALLY
Full Name (Last, First, Middle Initial)
Mailing Address 14529 ROBINSON RD
City PLAIN CITY State OH Zip Code 43064
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, OPERATIONS MGMT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 684.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739476817
Amount of Each Receipt this Period 114.00
P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 285.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 102
	<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 AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial) A. DANA R THACKER		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8739486817
Mailing Address 2934 GRIFFIN DR		Amount of Each Receipt this Period 57.00
City LEWIS CENTER	State OH	Zip Code 43035
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation DIR, SOFTWARE ENGINEE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. JAMES P COMBS		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8739496817
Mailing Address 69259 LEE ROAD		Amount of Each Receipt this Period 57.00
City ST CLAIRSVILLE	State OH	Zip Code 43950
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation EXEC, ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. MICHAEL P P KENNEDY		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8739506817
Mailing Address 4783 VISTA RIDGE DR		Amount of Each Receipt this Period 300.90
City DUBLIN	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation SVP, COMPLIANCE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1705.10	P/R Deduction (\$100.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	414.90
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 40 OF 102
	<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 AKA Cardinal Health Companies PAC

A. CAROLYN E E GRANT
Full Name (Last, First, Middle Initial)
Mailing Address 6869 MEADOW GLEN DR
City WESTERVILLE State OH Zip Code 43082
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation DIR , GOVERNMENT REL
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 684.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739546817
Amount of Each Receipt this Period 114.00
P/R Deduction (\$38.00 Bi-Weekly)

B. KRISTINA J A J KALLMEYER
Full Name (Last, First, Middle Initial)
Mailing Address 1110 LAKEMONT DRIVE
City SPRINGBORO State OH Zip Code 45066
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, ACCOUNT (HEALTH)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739556817
Amount of Each Receipt this Period 60.00
P/R Deduction (\$20.00 Bi-Weekly)

C. TROY L HANSON
Full Name (Last, First, Middle Initial)
Mailing Address 5622 DORSEY DRIVE
City COLUMBUS State OH Zip Code 43235
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation DIR, MKTG & PRODUCT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 822.24

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739586817
Amount of Each Receipt this Period 137.04
P/R Deduction (\$45.68 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 311.04
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 OF 102
	<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 AKA Cardinal Health Companies PAC

A. PATRICK A A SELLS
Full Name (Last, First, Middle Initial)
Mailing Address 3460 HYATTS RD
City State Zip Code
POWELL OH 43065
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CARDINAL HEALTH, INC DIR, HR BUSINESS PAR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 342.00

Date of Receipt
08 / 31 / 2013
Transaction ID : PR8739616817
Amount of Each Receipt this Period 57.00
P/R Deduction (\$19.00 Bi-Weekly)

B. CASSANDRA E RA E BAKER
Full Name (Last, First, Middle Initial)
Mailing Address 1751 BARRINGTON RD
City State Zip Code
UPPER ARLINGTON OH 43221
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CARDINAL HEALTH, INC VP, GOVT RELATIONS M
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1185.12

Date of Receipt
08 / 31 / 2013
Transaction ID : PR8739646817
Amount of Each Receipt this Period 197.52
P/R Deduction (\$65.84 Bi-Weekly)

C. JAMES M BARKER
Full Name (Last, First, Middle Initial)
Mailing Address 2761 SKELTON LN
City State Zip Code
BLACKLICK OH 43004
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CARDINAL HEALTH, INC VP, MANUFACTURING MG
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 617.94

Date of Receipt
08 / 31 / 2013
Transaction ID : PR8739666817
Amount of Each Receipt this Period 102.99
P/R Deduction (\$34.33 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 357.51
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 42 OF 102
(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 AKA Cardinal Health Companies PAC

A. JAMES J HOMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 520 EDEN PARK DRIVE
 City FRANKLIN State TN Zip Code 37067
 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 ▼ 239.76

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739676817
 Amount of Each Receipt this Period 39.96
 P/R Deduction (\$13.32 Bi-Weekly)

B. STEPHEN T T FALK
 Full Name (Last, First, Middle Initial)
 Mailing Address 2175 LANE RD
 City COLUMBUS State OH Zip Code 43220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation EVP & GENERAL COUNSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739686817
 Amount of Each Receipt this Period 300.00
 P/R Deduction (\$100.00 Bi-Weekly)

C. CHAD E SANDERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 831 ELLIS ST
 City PICKERINGTON State OH Zip Code 43147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation EXEC, TERRITORY SALE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739716817
 Amount of Each Receipt this Period 36.00
 P/R Deduction (\$12.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.96
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 43 OF 102
<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 AKA Cardinal Health Companies PAC

A. CAROLE S S WATKINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1967 WOODLANDS PLACE
 City State Zip Code
 POWELL OH 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC CHIEF HUMAN RESOURCE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3461.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8739726817
 Amount of Each Receipt this Period
 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

B. MARY C SCHERER
 Full Name (Last, First, Middle Initial)
 Mailing Address 223 WEATHERBURN CT
 City State Zip Code
 POWELL OH 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, FINANCE (GENERAL)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8739736817
 Amount of Each Receipt this Period
 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

C. JON GIACOMIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 6792 INGALLS CT
 City State Zip Code
 GALENA OH 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC EVP, OPERATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8739746817
 Amount of Each Receipt this Period
 225.00
 P/R Deduction (\$75.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	846.90
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 44 OF 102
<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 AKA Cardinal Health Companies PAC

A. DALE A HILL
Full Name (Last, First, Middle Initial)
Mailing Address 5931 HERITAGE FARMS DR
City Hilliard State OH Zip Code 43026
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation DIR, PHARM STRAT SOU
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **342.00**

Date of Receipt **08 / 31 / 2013**
Transaction ID : PR8739756817
Amount of Each Receipt this Period **57.00**
P/R Deduction (\$19.00 Bi-Weekly)

B. ANNE F MCCLUSKEY
Full Name (Last, First, Middle Initial)
Mailing Address 10910 E SAN TAN BLVD
City Sun Lakes State AZ Zip Code 85248
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation DIR, CLINICAL OPS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **342.00**

Date of Receipt **08 / 31 / 2013**
Transaction ID : PR8739766817
Amount of Each Receipt this Period **57.00**
P/R Deduction (\$19.00 Bi-Weekly)

C. ROBERT GIACALONE
Full Name (Last, First, Middle Initial)
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
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **900.00**

Date of Receipt **08 / 31 / 2013**
Transaction ID : PR8739786817
Amount of Each Receipt this Period **150.00**
P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **264.00**
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 45 OF 102
(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 AKA Cardinal Health Companies PAC

A. PAMELA S S HOLOHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 405 E WASHINGTON ST
 City State Zip Code
 GARDNER IL 60424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC EXEC, ACCOUNT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8739796817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. DEBRA A FLUNO
 Full Name (Last, First, Middle Initial)
 Mailing Address 622 SUNNYSIDE AVE
 City State Zip Code
 GURNEE IL 60031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC DIR, PHARM OPS & ACC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8739806817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. MICHAEL D D BROWN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3103 SADDLE RIDGE
 City State Zip Code
 RICHMOND TX 77406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, PHARM OPS & ACCO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 684.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8739826817
 Amount of Each Receipt this Period
 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 228.00
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 46 OF 102
(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 AKA Cardinal Health Companies PAC

A. JACQUELINE A INE A GLEASON
 Full Name (Last, First, Middle Initial)
 Mailing Address N 7896 VALLEY VIEW RD
 City NEW GLARUS State WI Zip Code 53574
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, TERRITORY SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739876817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. ANTHONY D D WOO
 Full Name (Last, First, Middle Initial)
 Mailing Address 6151 HADDO WAY
 City DUBLIN State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, CORP DEVEL, FIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739886817
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

C. TERESA M M JANZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 2431 N. 84TH STREET
 City WAUWATOSA State WI Zip Code 53226
 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 ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8739896817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 174.00
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 47 OF 102
(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 AKA Cardinal Health Companies PAC

A. KATHRYN J J ABLEIDINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 ASHBURY CT
 City HUDSON State WI Zip Code 54016
 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 ▼ 684.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8739906817
 Amount of Each Receipt this Period 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. DANIEL R R ROBINSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 8124 CROOKED OAKS CT
 City GAINESVILLE State VA Zip Code 20155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, PHARM OPS & ACCO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 684.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8739916817
 Amount of Each Receipt this Period 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

C. STEVE M LAWRENCE
 Full Name (Last, First, Middle Initial)
 Mailing Address 4868 CARRIGAN RIDGE
 City DUBLIN State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, RETAIL INDEPEND
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8739926817
 Amount of Each Receipt this Period 300.00
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 528.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 102
<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 AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial) A. GORDON A A CRAWFORD		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8739936817
Mailing Address 8735 RICHARDS RD.		Amount of Each Receipt this Period 57.00
City UTICA	State OH	Zip Code 43080
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	
Occupation DIR, IT PROG/PROJ MG		P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	

Full Name (Last, First, Middle Initial) B. DAVID LAWRENCE		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8739946817
Mailing Address 326 VINWOOD LANE		Amount of Each Receipt this Period 150.00
City POWELL	State OH	Zip Code 43065
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	
Occupation VP, STRATEGIC PLNG/E		P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) C. MARK E ROSENBAUM		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8739956817
Mailing Address 815 HAMMOCK LANE		Amount of Each Receipt this Period 576.90
City KNOXVILLE	State TN	Zip Code 37934
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	
Occupation CHIEF CUSTOMER OFFIC		P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3461.40	

SUBTOTAL of Receipts This Page (optional).....▶	783.90
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 49 OF 102
<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 AKA Cardinal Health Companies PAC

A. STUART MARTIN
Full Name (Last, First, Middle Initial)

Mailing Address 9711 CONCORD RIDGE

City BRENWOOD State TN Zip Code 37027

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 ▼ **342.00**

Date of Receipt: **08 / 31 / 2013**

Transaction ID : PR8739976817

Amount of Each Receipt this Period: **57.00**

P/R Deduction (\$19.00 Bi-Weekly)

B. LAWRENCE E MALHAM
Full Name (Last, First, Middle Initial)

Mailing Address 206 LONE OAK DRIVE

City WHITE HOUSE State TN Zip Code 37188

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

Name of Employer: CARDINAL HEALTH, INC Occupation: DIR, TERRITORY SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt: **08 / 31 / 2013**

Transaction ID : PR8739986817

Amount of Each Receipt this Period: **57.00**

P/R Deduction (\$19.00 Bi-Weekly)

C. JOHN E HOWARD
Full Name (Last, First, Middle Initial)

Mailing Address 30 CULLEN DR

City MOBILE State AL Zip Code 36606

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

Name of Employer: CARDINAL HEALTH, INC Occupation: SR CNSLT, FRANCHISE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt: **08 / 31 / 2013**

Transaction ID : PR8740016817

Amount of Each Receipt this Period: **45.00**

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

SUBTOTAL of Receipts This Page (optional).....▶	159.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 102
<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 AKA Cardinal Health Companies PAC

A. DAVID E GAJESKI
Full Name (Last, First, Middle Initial)

Mailing Address 21406 SAUNTON DR

City KATY State TX Zip Code 77450

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **684.00**

Date of Receipt **08 / 31 / 2013**

Transaction ID : PR8740036817

Amount of Each Receipt this Period **114.00**

P/R Deduction (\$38.00 Bi-Weekly)

B. KENDELL F F SHERRER
Full Name (Last, First, Middle Initial)

Mailing Address 500 SOUTH PARKVIEW AVENUE SUITE 305

City BEXLEY State OH Zip Code 43209

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, BENEFITS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **361.98**

Date of Receipt **08 / 31 / 2013**

Transaction ID : PR8740086817

Amount of Each Receipt this Period **60.33**

P/R Deduction (\$20.11 Bi-Weekly)

C. GARY B ELLIS
Full Name (Last, First, Middle Initial)

Mailing Address 6146 BALMORAL DRIVE

City DUBLIN State OH Zip Code 43017

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

Name of Employer CARDINAL HEALTH, INC Occupation SVP, HSS SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt **08 / 31 / 2013**

Transaction ID : PR8740096817

Amount of Each Receipt this Period **60.00**

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

SUBTOTAL of Receipts This Page (optional)..... **234.33**

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 51 OF 102
	<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 AKA Cardinal Health Companies PAC

A. ERIC M NORMAN
Full Name (Last, First, Middle Initial)

Mailing Address 7170 KINGSCOTE CT.

City DUBLIN State OH Zip Code 43017

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

Name of Employer CARDINAL HEALTH, INC Occupation SVP, HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt **08 / 31 / 2013**

Transaction ID : PR8740106817

Amount of Each Receipt this Period **57.00**

P/R Deduction (\$19.00 Bi-Weekly)

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

Mailing Address 1423 SHADY VALLEY

City SUGAR LAND State TX Zip Code 77479

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

Name of Employer CARDINAL HEALTH, INC Occupation SR CNSLT, BUS ANALYS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **08 / 31 / 2013**

Transaction ID : PR8740116817

Amount of Each Receipt this Period **45.00**

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

C. THERESA L L GOULD
Full Name (Last, First, Middle Initial)

Mailing Address 3418 BIG HICKORY DR.

City KINGWOOD State TX Zip Code 77345

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, HR BUSINESS PART

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **08 / 31 / 2013**

Transaction ID : PR8740136817

Amount of Each Receipt this Period **75.00**

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

SUBTOTAL of Receipts This Page (optional)..... **177.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 102
	<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 AKA Cardinal Health Companies PAC

A. TINA M STAVINOHA
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 ARROW ROAD
 City EAGLE LAKE State TX Zip Code 77434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, LEARNING MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740146817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. CONNIE WOODBURN
 Full Name (Last, First, Middle Initial)
 Mailing Address 9761 ERIN WOODS DR
 City DUBLIN State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, PROF & GOV'T REL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2430.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740156817
 Amount of Each Receipt this Period 405.00
 P/R Deduction (\$135.00 Bi-Weekly)

C. ROBBIE D D JORGENSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 578 MORTS DRIVE
 City WENTZVILLE State MO Zip Code 63385
 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 ▼ 684.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740166817
 Amount of Each Receipt this Period 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 576.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 53 OF 102
<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 AKA Cardinal Health Companies PAC

A. BRIAN WORTH
Full Name (Last, First, Middle Initial)
Mailing Address 5654 ROTHESAY DRIVE

City DUBLIN	State OH	Zip Code 43017
----------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation SVP, HR BUSINESS PAR
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8740196817

Amount of Each Receipt this Period

75.00

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

B. DAVID S OLSON
Full Name (Last, First, Middle Initial)
Mailing Address 12211 CLEARFORK DR

City HOUSTON	State TX	Zip Code 77077
-----------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation DIR, PHARM OPS & ACC
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8740236817

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

C. ERIC C CHRISTENSEN
Full Name (Last, First, Middle Initial)
Mailing Address 2481 SUTTER PARKWAY

City DUBLIN	State OH	Zip Code 43016
----------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation VP, ASC GEN CSL, COM
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8740246817

Amount of Each Receipt this Period

75.00

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

SUBTOTAL of Receipts This Page (optional).....▶	207.00
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 54 OF 102
(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 AKA Cardinal Health Companies PAC

A. RAYMOND GROTZINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 0836 SW CURRY ST # 102
 City PORTLAND State OR Zip Code 97239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC DIR, MULTI-FUNCTION
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 08 / 31 / 2013
Transaction ID : PR8740276817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. ROBERT G G MURPHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2818 FRANCIS LANE
 City COSTA MESA State CA Zip Code 92626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, DIRECT SALES MGM
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 08 / 31 / 2013
Transaction ID : PR8740286817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. DAVID M ELLIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 6521 GOYA WAY
 City EL DORADO HILLS State CA Zip Code 95762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC DIR, TERRITORY SALES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 08 / 31 / 2013
Transaction ID : PR8740296817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 171.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 102
<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 AKA Cardinal Health Companies PAC

A. BLAIR R WILLIAMS
Full Name (Last, First, Middle Initial)

Mailing Address 663 LYNNFIELD DR

City WESTERVILLE State OH Zip Code 43081

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, HR MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **684.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8740316817

Amount of Each Receipt this Period
114.00

P/R Deduction (\$38.00 Bi-Weekly)

B. ANDREW R R KELLER
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3732

City DUBLIN State OH Zip Code 43016

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, INVENTORY MGMT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **684.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8740336817

Amount of Each Receipt this Period
114.00

P/R Deduction (\$38.00 Bi-Weekly)

C. ERIC M JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 8078 TRAIL LAKE DR

City POWELL State OH Zip Code 43065

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, FINANCE (GENERAL)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **684.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8740406817

Amount of Each Receipt this Period
114.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	342.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 102
	<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 AKA Cardinal Health Companies PAC

A. JILL F LANOUILLE
Full Name (Last, First, Middle Initial)

Mailing Address 19 OLD FARM ROAD

City GRANVILLE State OH Zip Code 43023

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, COMMUNICATION MG

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740416817

Amount of Each Receipt this Period 57.00

P/R Deduction (\$19.00 Bi-Weekly)

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

Mailing Address 6666 MCVEY BLVD

City WEST WORTHINGTON State OH Zip Code 43235

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

Name of Employer CARDINAL HEALTH, INC Occupation DIR, ANALYTICS AND I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 495.72

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740426817

Amount of Each Receipt this Period 82.62

P/R Deduction (\$27.54 Bi-Weekly)

C. MELISSA A A LABER
Full Name (Last, First, Middle Initial)

Mailing Address 7174 LINWORTH RD.

City COLUMBUS State OH Zip Code 43235

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, PHARM STRAT SOUR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740446817

Amount of Each Receipt this Period 36.00

P/R Deduction (\$12.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 175.62

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 57 OF 102
	<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 AKA Cardinal Health Companies PAC

A. KEVIN HARRY
Full Name (Last, First, Middle Initial)
Mailing Address 3003 BREEZEWOOD LN
City GALENA State OH Zip Code 43021
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, FINANCE (GENERAL)
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **342.00**

Date of Receipt **08 / 31 / 2013**
Transaction ID : PR8740456817
Amount of Each Receipt this Period **57.00**
P/R Deduction (\$19.00 Bi-Weekly)

B. LAUREN E E FIELDS
Full Name (Last, First, Middle Initial)
Mailing Address 4316 OAK WOOD COURT
City DUBLIN State OH Zip Code 43016
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation DIR, MARKETING MGMT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **342.00**

Date of Receipt **08 / 31 / 2013**
Transaction ID : PR8740466817
Amount of Each Receipt this Period **57.00**
P/R Deduction (\$19.00 Bi-Weekly)

C. MARC D DELORENZO
Full Name (Last, First, Middle Initial)
Mailing Address 231 TILLER DRIVE
City POWELL State OH Zip Code 43065
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, TERRITORY SALES
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **684.00**

Date of Receipt **08 / 31 / 2013**
Transaction ID : PR8740496817
Amount of Each Receipt this Period **114.00**
P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **228.00**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 102
	<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 AKA Cardinal Health Companies PAC

A. WILLIAM B B CHRISTIAN
Full Name (Last, First, Middle Initial)

Mailing Address 3325 LITTLEPORT LANE

City ACWORTH State GA Zip Code 30101

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, ACCOUNT (HEALTH)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **684.00**

Date of Receipt
08 / 31 / 2013
Transaction ID : PR8740536817

Amount of Each Receipt this Period
114.00

P/R Deduction (\$38.00 Bi-Weekly)

B. ERIC T BOLLING
Full Name (Last, First, Middle Initial)

Mailing Address 13162 THORNTON DRIVE

City FRISCO State TX Zip Code 75035

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, ACCOUNT (STRAT A)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt
08 / 31 / 2013
Transaction ID : PR8740546817

Amount of Each Receipt this Period
57.00

P/R Deduction (\$19.00 Bi-Weekly)

C. MARY W BAXTER
Full Name (Last, First, Middle Initial)

Mailing Address 3913 REGAL COURT

City VIRGINIA BEACH State VA Zip Code 23452

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, PHARM OPS & ACCO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **684.00**

Date of Receipt
08 / 31 / 2013
Transaction ID : PR8740556817

Amount of Each Receipt this Period
114.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	285.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 102
	<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 AKA Cardinal Health Companies PAC

A. KIMBERLY A Y A ROBINETTE
 Full Name (Last, First, Middle Initial)
 Mailing Address 9409 AVE MORE CT.
 City DUBLIN State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, FINANCE (SS) MG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740576817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. PAUL T BUSTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 66 W BEECHWOLD BLVD
 City COLUMBUS State OH Zip Code 43214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, SOFTWARE ENGINE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740596817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. CAMERON J J BRADY
 Full Name (Last, First, Middle Initial)
 Mailing Address 529 N. MILWAUKEE AVE. UNIT 2N
 City CHICAGO State IL Zip Code 60642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, BUS INTEGRATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740626817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 171.00
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 60 OF 102
(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 AKA Cardinal Health Companies PAC

A. SCOTT WOLFF
 Full Name (Last, First, Middle Initial)
 Mailing Address 3446 N CLAREMONT AVE
 City CHICAGO State IL Zip Code 60618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, OPERATIONAL EXC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740656817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. BRIAN K SINGLETON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2521 EAST 31ST STREET
 City TULSA State OK Zip Code 74105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, TERRITORY SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740666817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. JOHN S LINDSEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 TIMBERKNOLL LOOP
 City POWELL State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, ENTERPRISE INFR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 684.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740676817
 Amount of Each Receipt this Period 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 228.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 102
	<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 AKA Cardinal Health Companies PAC

A. CRAIG C BARANSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 MASSINA DR
 City WHEELING State WV Zip Code 26003
 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 ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740686817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. JAMES E BACH
 Full Name (Last, First, Middle Initial)
 Mailing Address 26061 TWIN POND RD
 City LAKE BARRINGTON State IL Zip Code 60010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, INVENTORY MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 684.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740696817
 Amount of Each Receipt this Period 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

C. BRIAN R BUSS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7483 BARDSTON DRIVE
 City DUBLIN State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, SOFTWARE ENGINE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740706817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 228.00
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 62 OF 102
(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 AKA Cardinal Health Companies PAC

A. ROBERT M M GABEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1605 BERLIN STATION RD
 City State Zip Code
 DELAWARE OH 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC DIR, RISK MGMT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8740716817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. HAROLD E E GRUBBS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7802 SPENCER BROOK DR
 City State Zip Code
 SUMMERFIELD NC 27358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC DIR, OPERATIONS MGMT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 216.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8740726817
 Amount of Each Receipt this Period
 36.00
 P/R Deduction (\$12.00 Bi-Weekly)

C. HARRY BEDGOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 LEE SMITH LANE
 City State Zip Code
 KERNERSVILLE NC 27284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC DIR, OP EXCELLENCE D
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8740746817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ► 150.00
TOTAL This Period (last page this line number only)..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 63 OF 102
<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 AKA Cardinal Health Companies PAC

A. JEFFREY W W HENDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 347 MORGAN LN
 City State Zip Code
 GAHANNA OH 43230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC CHIEF FINANCIAL OFFI
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8740756817
 Amount of Each Receipt this Period
 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

B. JOHN J BYRNES
 Full Name (Last, First, Middle Initial)
 Mailing Address 161 TUCKER DR
 City State Zip Code
 WORTHINGTON OH 43085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, TAX TECHNICAL
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 684.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8740766817
 Amount of Each Receipt this Period
 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

C. ANDREW GRANT
 Full Name (Last, First, Middle Initial)
 Mailing Address 9440 NICHOLSON WAY
 City State Zip Code
 DUBLIN OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, ACCOUNT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8740776817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	231.00
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 64 OF 102
(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 AKA Cardinal Health Companies PAC

A. KENNETH H H ROBINETTE
 Full Name (Last, First, Middle Initial)
 Mailing Address 9409 AVE MORE 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, OPERATIONAL EXCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 684.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740786817
 Amount of Each Receipt this Period 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. JASON D MAXWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 DOVER ROAD
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, ASC GEN CSL, LIT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740796817
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

C. DONALD S S LUCHINI
 Full Name (Last, First, Middle Initial)
 Mailing Address 212 LAKESIDE DRIVE
 City MCKEES ROCKS State PA Zip Code 15136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, FINANCE (GENERA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740826817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 231.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 102
	<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 AKA Cardinal Health Companies PAC

A. DENNIS W W BRAUN
Full Name (Last, First, Middle Initial)

Mailing Address 5667 MEDALLION DR WEST

City WESTERVILLE State OH Zip Code 43082

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

Name of Employer CARDINAL HEALTH, INC Occupation SVP, FINANCE MEDICAL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2013

Transaction ID : PR8740836817

Amount of Each Receipt this Period
57.00

P/R Deduction (\$19.00 Bi-Weekly)

B. JEFFREY E E GREER
Full Name (Last, First, Middle Initial)

Mailing Address 1570 CAMBRIDGE BLVD

City MARBLE CLIFF State OH Zip Code 43212

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, ENTERPRISE ARCHI

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2013

Transaction ID : PR8740866817

Amount of Each Receipt this Period
57.00

P/R Deduction (\$19.00 Bi-Weekly)

C. AMELIA D D MCCARTY
Full Name (Last, First, Middle Initial)

Mailing Address 5864 LAKEVIEW DR

City HILLIARD State OH Zip Code 43026

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

Name of Employer CARDINAL HEALTH, INC Occupation ASST GEN CSL, REGULA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2013

Transaction ID : PR8740876817

Amount of Each Receipt this Period
57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	171.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 66 OF 102
<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 AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial) A. BENNY SLEDGE		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8740896817
Mailing Address 8016 W 138TH TERRACE		Amount of Each Receipt this Period 114.00
City OVERLAND PARK	State KS	Zip Code 66223
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation VP,BUSINESS ACQUISIT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 684.00	P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. JAMES W HILLMAN		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8740906817
Mailing Address 141 WOODSTREAM DR		Amount of Each Receipt this Period 90.00
City GRAND ISLAND	State NY	Zip Code 14072
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation VP, DIRECT SALES MGM
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. COLLEEN GREINER		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8740916817
Mailing Address 424 VINTAGE CIRCLE		Amount of Each Receipt this Period 57.00
City MYRTLE BEACH	State SC	Zip Code 29579
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation EXEC, ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	261.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 102
	<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 AKA Cardinal Health Companies PAC

A. GREGORY J J HALVACS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7402 OVERLAND TRAIL
 City DELAWARE State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, CORPORATE SECUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740946817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. MICHAEL A A MONE
 Full Name (Last, First, Middle Initial)
 Mailing Address 4909 SCENIC CREEK DR
 City POWELL State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, ASC GEN CSL, REG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 684.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740956817
 Amount of Each Receipt this Period 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

C. MICHAEL A A DUFFY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6825 MACNEIL DR
 City DUBLIN State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation PRES, MED CONSUMABLE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8740966817
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 231.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 102
	<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 AKA Cardinal Health Companies PAC

A. STANLEY L L NAGEL
Full Name (Last, First, Middle Initial)

Mailing Address 5771 OLDENBURGH WAY

City DUBLIN State OH Zip Code 43016

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, HR BUSINESS PART

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt
MM / DD / YYYY
08 / 31 / 2013

Transaction ID : PR8740976817

Amount of Each Receipt this Period
57.00

P/R Deduction (\$19.00 Bi-Weekly)

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

Mailing Address 490 E. SUNBURST LN

City TEMPE State AZ Zip Code 85284

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

Name of Employer CARDINAL HEALTH, INC Occupation SVP, HSS CUSTOMER SU

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt
MM / DD / YYYY
08 / 31 / 2013

Transaction ID : PR8741016817

Amount of Each Receipt this Period
150.00

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

C. LISA MARLING-GEORGE
Full Name (Last, First, Middle Initial)

Mailing Address 9334 PRATOLINO VILLA DR.

City DUBLIN State OH Zip Code 43016

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, TALENT MGMT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt
MM / DD / YYYY
08 / 31 / 2013

Transaction ID : PR8741026817

Amount of Each Receipt this Period
57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	264.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 69 OF 102
<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 AKA Cardinal Health Companies PAC

A. DONALD C C GREENWOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 14402 MARINA SAN PABLO PLACE # 1002
 City JACKSONVILLE State FL Zip Code 32224-0828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP,BUSINESS ACQUISIT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741036817
 Amount of Each Receipt this Period 75.00
 P/R Deduction (\$25.00 Bi-Weekly)

B. ANDREW T T ALDERMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1225 LEICESTER PL.
 City COLUMBUS State OH Zip Code 43235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, STRATEGY & BUS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 684.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741056817
 Amount of Each Receipt this Period 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

C. SHELLEY A A BIRD
 Full Name (Last, First, Middle Initial)
 Mailing Address 7998 CARAWAY AVE
 City DUBLIN State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation EVP, PUBLIC AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741066817
 Amount of Each Receipt this Period 300.00
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	489.00
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 70 OF 102
(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 AKA Cardinal Health Companies PAC

A. ROBERT S S THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 8338 AMBERLEIGH WAY
 City DUBLIN State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, STRATEGIC PLNG/E
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741076817
 Amount of Each Receipt this Period 75.00
 P/R Deduction (\$25.00 Bi-Weekly)

B. ANDREW W W WEHR
 Full Name (Last, First, Middle Initial)
 Mailing Address 905 LITTLE BEAR LOOP
 City LEWIS CENTER State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIRECTOR, EH&S
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741086817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. RONALD BROWN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7417 NEWALBANYLINKDR
 City NEW ALBANY State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, OPERATIONS MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741096817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 189.00
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 71 OF 102
(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 AKA Cardinal Health Companies PAC

A. ISMAEL VILLARREAL
 Full Name (Last, First, Middle Initial)
 Mailing Address 7302 EMERALD GLEN DR
 City State Zip Code
 SUGAR LAND TX 77479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC DIR, OPERATIONS MGMT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 684.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741106817
 Amount of Each Receipt this Period
 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. DAVID R DION
 Full Name (Last, First, Middle Initial)
 Mailing Address 182 N FLORA PARKWAY
 City State Zip Code
 ADDISON IL 60101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC DIR, QUALITY ASSURAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741116817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. MAUREEN GIRARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 N GARLAND
 City State Zip Code
 CHICAGO IL 60602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, MKTG & PRODUCT M
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741146817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 228.00
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 72 OF 102
(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 AKA Cardinal Health Companies PAC

A. ELIZABETH M TH M KRENZER
 Full Name (Last, First, Middle Initial)
 Mailing Address 343 MILFORD DR
 City DEERFIELD State IL Zip Code 60015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, MANUFACTURING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 323.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741156817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. JESSICA L L MAYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4852 CARRIGAN RIDGE
 City DUBLIN State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, ASC GEN CSL, COM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741176817
 Amount of Each Receipt this Period 90.00
 P/R Deduction (\$30.00 Bi-Weekly)

C. STUART G G LAWS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5635 CYPRESS COURT
 City WESTERVILLE State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, CHIEF ACCOUNTIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741206817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 204.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 102
	<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 AKA Cardinal Health Companies PAC

A. ANNEMARIE IE LA BUE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1877 TEWKSBURY RD
 City UPPER ARLINGTON State OH Zip Code 43221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, ASC GEN CSL, LAB
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt
 08 / 31 / 2013
Transaction ID : PR8741246817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. CARL E HALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 626 W WRIGHTWOOD AVE #1E
 City CHICAGO State IL Zip Code 60614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, MKTG & PRODUCT M
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 08 / 31 / 2013
Transaction ID : PR8741256817
 Amount of Each Receipt this Period 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

C. EDEN C SULZER
 Full Name (Last, First, Middle Initial)
 Mailing Address 522 BANTRY ST
 City POWELL State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, COMMUNICATION M
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt
 08 / 31 / 2013
Transaction ID : PR8741316817
 Amount of Each Receipt this Period 36.00
 P/R Deduction (\$12.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	138.00
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 74 OF 102
(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 AKA Cardinal Health Companies PAC

A. SANJEETH H PAI
 Full Name (Last, First, Middle Initial)
 Mailing Address 367 CEDAR TRACE
 City XENIA State OH Zip Code 45385-9392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, PHARM STRAT SOUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741356817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. CHRISTINE L NE L BENTLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 12283 SOUTH PARKER STREET
 City OLATHE State KS Zip Code 66061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, MANGNG CNSLT, S
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741366817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. KEVIN L MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 804 CATALINA COURT
 City MACON State MO Zip Code 63552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, MANUFACTURING M
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741386817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 171.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 75 OF 102
<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 AKA Cardinal Health Companies PAC

A. JOSEPH A A GOTTRON
 Full Name (Last, First, Middle Initial)
 Mailing Address 874 AYLESBURY DRIVE
 City State Zip Code
 GAHANNA OH 43230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC SVP, PHARMACEUTICAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741396817
 Amount of Each Receipt this Period
 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

B. JEFFREY A A CRIST
 Full Name (Last, First, Middle Initial)
 Mailing Address 6532 WESTBURY DRIVE
 City State Zip Code
 DUBLIN OH 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC DIR, IT CLIENT SYS M
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741426817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. JOHN C RADEMACHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5006 ROSALIND LANE
 City State Zip Code
 POWELL OH 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC PRESIDENT, AMBULATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741486817
 Amount of Each Receipt this Period
 300.00
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	417.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 102
	<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 AKA Cardinal Health Companies PAC

A. SAMER ABDUL-SAMAD
Full Name (Last, First, Middle Initial)

Mailing Address 6271 BELVEDERE GREEN BLVD

City DUBLIN State OH Zip Code 43016

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

Name of Employer CARDINAL HEALTH, INC Occupation SVP, TREASURER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741506817

Amount of Each Receipt this Period 45.00

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

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

Mailing Address 900 EASTCHESTER DR

City GAHANNA State OH Zip Code 43230

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, COMMUNITY RELATI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 684.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741516817

Amount of Each Receipt this Period 114.00

P/R Deduction (\$38.00 Bi-Weekly)

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

Mailing Address 9035 ESIN COURT

City POWELL State OH Zip Code 43065

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

Name of Employer CARDINAL HEALTH, INC Occupation SVP, INVESTOR RELATI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741526817

Amount of Each Receipt this Period 225.00

P/R Deduction (\$75.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 384.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 102
	<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 AKA Cardinal Health Companies PAC

A. GEORGE S S BARRETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 246 E. SYCAMORE ST.
 City COLUMBUS State OH Zip Code 43206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation CHAIRMAN/CEO, CARDIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3461.40

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741536817
 Amount of Each Receipt this Period 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

B. MARK PILKINGTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 8191 HILLINGDON DRIVE
 City POWELL State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, STRATEGY MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 684.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741536817
 Amount of Each Receipt this Period 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

C. CRAIG MORFORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 5565 LAKE SHORE AVE,
 City WESTERVILLE State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation CHIEF COMPLIANCE/LEG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3461.40

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741596817
 Amount of Each Receipt this Period 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 1267.80
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 78 OF 102
	<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 AKA Cardinal Health Companies PAC

A. TOHID A VAHEDIAN
Full Name (Last, First, Middle Initial)

Mailing Address 1857 COLLINGSWOOD RD

City COLUMBUS State OH Zip Code 43221

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

Name of Employer CARDINAL HEALTH, INC Occupation SVP, GM MED SVCS & S

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **08 / 31 / 2013**

Transaction ID : PR8741636817

Amount of Each Receipt this Period **75.00**

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

B. MICHAEL J J MANGIONE
Full Name (Last, First, Middle Initial)

Mailing Address 10733 JONES ROAD

City CLARENCE State NY Zip Code 14031

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

Name of Employer CARDINAL HEALTH, INC Occupation DIR, TERRITORY SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt **08 / 31 / 2013**

Transaction ID : PR8741646817

Amount of Each Receipt this Period **57.00**

P/R Deduction (\$19.00 Bi-Weekly)

C. ERIC J PERLA
Full Name (Last, First, Middle Initial)

Mailing Address 15426 COURT AMBER TL

City CYPRESS State TX Zip Code 77433

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

Name of Employer CARDINAL HEALTH, INC Occupation DIR, TERRITORY SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt **08 / 31 / 2013**

Transaction ID : PR8741656817

Amount of Each Receipt this Period **57.00**

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **189.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 102
	<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 AKA Cardinal Health Companies PAC

A. SEAN P WATERS
Full Name (Last, First, Middle Initial)

Mailing Address 2621 EAST ARABIAN DRIVE

City	State	Zip Code
GILBERT	AZ	85296

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

Name of Employer	Occupation
CARDINAL HEALTH, INC	VP, CHEM/PHARMA OPS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8741716817

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

B. HENRY M CHILTON
Full Name (Last, First, Middle Initial)

Mailing Address 32 PALISADES PARKWAY

City	State	Zip Code
OAK RIDGE	TN	37830

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

Name of Employer	Occupation
CARDINAL HEALTH, INC	VP, SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **684.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8741726817

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

C. WILLIAM S S CLAUNCH
Full Name (Last, First, Middle Initial)

Mailing Address 10744 CAMPDEN LAKES BLVD

City	State	Zip Code
DUBLIN	OH	43016

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

Name of Employer	Occupation
CARDINAL HEALTH, INC	VP, OPERATIONS SERVI

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **684.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

Transaction ID : PR8741736817

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	285.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

A. LUKE C AUGUSTINE
 Full Name (Last, First, Middle Initial)
 Mailing Address 10834 S 166TH ST
 City OMAHA State NE Zip Code 68136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741746817
 Amount of Each Receipt this Period 150.00
 P/R Deduction (\$50.00 Bi-Weekly)

B. KATHERINE A NE A BENSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3410 NOBB HILL DR
 City HUDSONVILLE State MI Zip Code 49426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, NUCLEAR PHARMAC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741756817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. DANIEL F F MURPHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 WILLOWBROOK RD
 City WEST HARTFORD State CT Zip Code 06107-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, NUCLEAR PHARMAC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8741766817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 264.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 102
	<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 AKA Cardinal Health Companies PAC

A. BENSON P P YANG
Full Name (Last, First, Middle Initial)

Mailing Address 137 LAKESIDE DRIVE

City State Zip Code
CORTE MADERA CA 94925

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

Name of Employer Occupation
CARDINAL HEALTH, INC VP, MULTI-FUNCTION M

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **532.00**

Date of Receipt
08 / 31 / 2013

Transaction ID : PR8741776817

Amount of Each Receipt this Period
-38.00

P/R Deduction (\$-38.00 Bi-Weekly)

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

Mailing Address 8050 LESIA DRIVE

City State Zip Code
DENHAM SPRINGS LA 70706

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

Name of Employer Occupation
CARDINAL HEALTH, INC MGR, NUCLEAR PHARMAC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **323.00**

Date of Receipt
08 / 31 / 2013

Transaction ID : PR8741786817

Amount of Each Receipt this Period
57.00

P/R Deduction (\$19.00 Bi-Weekly)

C. JOSEPH E E LUKACS
Full Name (Last, First, Middle Initial)

Mailing Address 18 VILLAGE GROVE RD

City State Zip Code
LITTLE ROCK AR 72211

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

Name of Employer Occupation
CARDINAL HEALTH, INC DIR, NUCLEAR PHARMAC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt
08 / 31 / 2013

Transaction ID : PR8741816817

Amount of Each Receipt this Period
57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	76.00
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 82 OF 102
(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 AKA Cardinal Health Companies PAC

A. MARC B MULLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1650 SHERBORNE LANE
 City State Zip Code
 POWELL OH 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, GM
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741856817
 Amount of Each Receipt this Period
 150.00
 P/R Deduction (\$50.00 Bi-Weekly)

B. IHSIEN S S LIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7664 MILL SPRINGS DRIVE
 City State Zip Code
 DUBLIN OH 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC DIR, STRATEGIC PRICI
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741866817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. WAYNE J BOUDREAUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 405 PETREL TRAIL
 City State Zip Code
 BRADENTON FL 34212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC DIR, NUCLEAR PHARMAC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741886817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 264.00
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 83 OF 102
(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 AKA Cardinal Health Companies PAC

A. CRAIG ROTHMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 SEMINOLE WAY
 City State Zip Code
 SHORT HILLS NJ 07078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, ACCOUNT (HEALTH)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741896817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. MICHAEL A A MARUSA
 Full Name (Last, First, Middle Initial)
 Mailing Address 38 ALPINE CIRCLE
 City State Zip Code
 SANDY HOOK CT 06482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, ACCOUNT (HEALTH)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741916817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. RONALD A A PADGITT
 Full Name (Last, First, Middle Initial)
 Mailing Address 6079 JONESWOOD DR
 City State Zip Code
 HILLIARD OH 43026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC DIR, MARKETING MGMT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 216.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741936817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 171.00
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 84 OF 102
(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 AKA Cardinal Health Companies PAC

A. ANITA ANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 27341 DAKOTA AVE.
 City ELKO State MN Zip Code 55020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation EXEC, ACCOUNT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741946817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. CATHY CHENETSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 5734 ENNISHANNON PLACE
 City DUBLIN State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, QRA MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741966817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. AKEEM C IMANJONES
 Full Name (Last, First, Middle Initial)
 Mailing Address 4955 FANCY-FREE LANE
 City COLUMBUS State OH Zip Code 43231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, HR BUSINESS PAR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8741976817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 171.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

A. ALFREDO S S RUSSO
 Full Name (Last, First, Middle Initial)
 Mailing Address 2490 ALUM CROSSING DRIVE
 City State Zip Code
 LEWIS CENTER OH 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC DIR, REGULATORY MGMT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8742016817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. DAVID K KORENSTEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3641 DAYSPRING DRIVE
 City State Zip Code
 HILLIARD OH 43026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC ASST GEN CSL, LITIGA
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8742026817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. RICHARD W W WATSON
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 991
 City State Zip Code
 SUMNER WA 98390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC DIR, OPERATIONS MGMT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8742036817
 Amount of Each Receipt this Period
 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	171.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 102
	<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 AKA Cardinal Health Companies PAC

A. ROGELIO A A ARMINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 6213 BLUFF TRAIL LN
 City EL PASO State TX Zip Code 79912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, OPERATIONAL EXC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8742046817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. ELEANOR M M DAUFENBACH
 Full Name (Last, First, Middle Initial)
 Mailing Address 2029 W. LANE AVENUE
 City COLUMBUS State OH Zip Code 43221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, CLINICAL OPS MG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8742056817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. PATRICIA A MORRISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 EAST ERIE #3801
 City CHICAGO State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation EVP, CIO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8742066817
 Amount of Each Receipt this Period 150.00
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 264.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 102
	<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 AKA Cardinal Health Companies PAC

A. MARK BLAKE
Full Name (Last, First, Middle Initial)

Mailing Address 129 NORWOOD AVE

City MONTCLAIR State NJ Zip Code 07043

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

Name of Employer CARDINAL HEALTH, INC Occupation EVP, STRATEGY & CORP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3461.40

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8742096817

Amount of Each Receipt this Period 576.90

P/R Deduction (\$192.30 Bi-Weekly)

B. URSULA L L MCNEILL
Full Name (Last, First, Middle Initial)

Mailing Address 376 ROBERTS RUN COVE

City SUWANEE State GA Zip Code 30024

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

Name of Employer CARDINAL HEALTH, INC Occupation DIR, HR BUSINESS PAR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8742106817

Amount of Each Receipt this Period 57.00

P/R Deduction (\$19.00 Bi-Weekly)

C. GILBERTO O QUINTERO
Full Name (Last, First, Middle Initial)

Mailing Address 6650 BRODIE BLVD

City DUBLIN State OH Zip Code 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 ▼ 684.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8742126817

Amount of Each Receipt this Period 114.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 747.90

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 88 OF 102
<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 AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial) A. COLIN HATCH		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8742156817
Mailing Address 1351 NOE BIXBY ROAD		Amount of Each Receipt this Period 57.00
City COLUMBUS	State OH	Zip Code 43232
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation DIR, TAX TECHNICAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	

Full Name (Last, First, Middle Initial) B. LANE CHERAMIE		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8742166817
Mailing Address 152 WEST 117TH STREET		Amount of Each Receipt this Period 114.00
City CUT OFF	State LA	Zip Code 70345
FEC ID number of contributing federal political committee. C		P/R Deduction (\$38.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation DIR, HEALTH SYSTEM P	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 684.00	

Full Name (Last, First, Middle Initial) C. DOUGLAS HELMREICH		Date of Receipt MM / DD / YYYY 08 / 31 / 2013 Transaction ID : PR8742176817
Mailing Address 6600 DEESIDE DR.		Amount of Each Receipt this Period 57.00
City DUBLIN	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation DIR, MARKETING RESEA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	

SUBTOTAL of Receipts This Page (optional).....▶	228.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 102
	<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 AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)
A. ROBERT WELLS

Mailing Address 301 BRIDLE PATH LANE

City ANNAPOLIS State MD Zip Code 21403

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

Name of Employer Occupation
CARDINAL HEALTH, INC VP, ASC GEN CSL, COM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
684.00

Date of Receipt
08 / 31 / 2013
Transaction ID : PR8742206817

Amount of Each Receipt this Period
114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. MARK S JONES

Mailing Address 1106 PORTSMOUTH CIRCLE

City GURNEE State IL Zip Code 60031

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

Name of Employer Occupation
CARDINAL HEALTH, INC DIR, MKTG & PRODUCT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
323.00

Date of Receipt
08 / 31 / 2013
Transaction ID : PR8742216817

Amount of Each Receipt this Period
57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. ROBERT J J DOONE

Mailing Address 6119 PEPPERGRASS COURT

City WESTERVILLE State OH Zip Code 43082

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

Name of Employer Occupation
CARDINAL HEALTH, INC VP, MARKETING MGMT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
342.00

Date of Receipt
08 / 31 / 2013
Transaction ID : PR8742226817

Amount of Each Receipt this Period
57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 228.00

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 90 OF 102
(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 AKA Cardinal Health Companies PAC

A. JEFFREY P P LEDBETTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6700 RIDPATH ROAD
 City GROVE CITY State OH Zip Code 43123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation CNSLT, ACCOUNT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8742236817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. MICHELLE M E M RETHMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 6417 BROMFIELD TRACE
 City CENTREVILLE State VA Zip Code 20120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation EXEC, TERRITORY SALE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8742246817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. CATHERINE S NE S KENWORTHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 5000 SLATE RUN WOODS COURT
 City COLUMBUS State OH Zip Code 43220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, CUSTOMER SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR8742256817
 Amount of Each Receipt this Period 300.00
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 414.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 102
	<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 AKA Cardinal Health Companies PAC

A. KAUSHIK GHOSH
Full Name (Last, First, Middle Initial)
Mailing Address 7691 FINBARR COURT
City DUBLIN State OH Zip Code 43017
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation DIR, MKTG & PRODUCT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **323.00**

Date of Receipt **08 / 31 / 2013**
Transaction ID : PR8742276817
Amount of Each Receipt this Period **57.00**
P/R Deduction (\$19.00 Bi-Weekly)

B. MEGHAN FITZGERALD
Full Name (Last, First, Middle Initial)
Mailing Address 6 MORGAN
City NORWALK State CT Zip Code 06851
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation PRES, SPECIALTY SOLU
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **900.00**

Date of Receipt **08 / 31 / 2013**
Transaction ID : PR8742286817
Amount of Each Receipt this Period **150.00**
P/R Deduction (\$50.00 Bi-Weekly)

C. MARSHA L L ARAGON
Full Name (Last, First, Middle Initial)
Mailing Address 29306 DAKOTA DR
City VALENCIA State CA Zip Code 91354
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 **342.00**

Date of Receipt **08 / 31 / 2013**
Transaction ID : PR8742296817
Amount of Each Receipt this Period **57.00**
P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **264.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<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 AKA Cardinal Health Companies PAC

A. DANIEL MOVENS
Full Name (Last, First, Middle Initial)

Mailing Address 987 RETREAT LANE

City Powell State OH Zip Code 43065

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

Name of Employer: CARDINAL HEALTH, INC
Occupation: SVP/GM, PARMED PHARM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 08 / 31 / 2013
Transaction ID : PR8742316817

Amount of Each Receipt this Period: 150.00

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

B. STEPHEN J J MEDVE
Full Name (Last, First, Middle Initial)

Mailing Address 271 E WHITTIER ST.

City COLUMBUS State OH Zip Code 43206

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

Name of Employer: CARDINAL HEALTH, INC
Occupation: DIR, TALENT ACQUISIT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt: 08 / 31 / 2013
Transaction ID : PR8742336817

Amount of Each Receipt this Period: 57.00

P/R Deduction (\$19.00 Bi-Weekly)

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

Mailing Address 2717 QUEEN ELAINE DRIVE

City LEWISVILLE State TX Zip Code 75056

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

Name of Employer: CARDINAL HEALTH, INC
Occupation: DIR, TECHNICAL SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt: 08 / 31 / 2013
Transaction ID : PR8742376817

Amount of Each Receipt this Period: 57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	264.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 102
	<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 AKA Cardinal Health Companies PAC

A. GAUTAM S S SHIRHATTIKAR
 Full Name (Last, First, Middle Initial)
 Mailing Address 5282 BRIDWELL LN
 City WESTERVILLE State OH Zip Code 43081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, STRATEGIC PLNG/E
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8742386817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. RAMON GREGORY
 Full Name (Last, First, Middle Initial)
 Mailing Address 9003 MEDITERRA PLACE
 City DUBLIN State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, CUSTOMER SERVIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8742396817
 Amount of Each Receipt this Period 75.00
 P/R Deduction (\$25.00 Bi-Weekly)

C. NICHOLAS S AUGUSTINOS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2416 15TH STREET
 City SAN FRANCISCO State CA Zip Code 94114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, HEALTH INFO & S
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2013
Transaction ID : PR8742416817
 Amount of Each Receipt this Period 300.00
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	432.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 94 OF 102
<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 AKA Cardinal Health Companies PAC

A. ROBERT A A HONNER
Full Name (Last, First, Middle Initial)
Mailing Address 7167 SPRINGVIEW LN
City DUBLIN State OH Zip Code 43016
FEC ID number of contributing federal political committee. **C**
Name of Employer: CARDINAL HEALTH, INC Occupation: DIR, FIN PLNG & ANAL
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **342.00**

Date of Receipt: 08 / 31 / 2013
Transaction ID : PR9340916817
Amount of Each Receipt this Period: 57.00
P/R Deduction (\$19.00 Bi-Weekly)

B. CATHY MOCK
Full Name (Last, First, Middle Initial)
Mailing Address 5440 YORK LANE NORTH
City COLUMBUS State OH Zip Code 43232
FEC ID number of contributing federal political committee. **C**
Name of Employer: CARDINAL HEALTH, INC Occupation: DIR, SUPPLIER DIVERS
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **342.00**

Date of Receipt: 08 / 31 / 2013
Transaction ID : PR9340926817
Amount of Each Receipt this Period: 57.00
P/R Deduction (\$19.00 Bi-Weekly)

C. SHAUN F YOUNG
Full Name (Last, First, Middle Initial)
Mailing Address 8145 SUMMERHOUSE DRIVE WEST
City DUBLIN State OH Zip Code 43016
FEC ID number of contributing federal political committee. **C**
Name of Employer: CARDINAL HEALTH, INC Occupation: VP, MKTG & PRODUCT M
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **900.00**

Date of Receipt: 08 / 31 / 2013
Transaction ID : PR9340946817
Amount of Each Receipt this Period: 150.00
P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **264.00**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 102
	<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 AKA Cardinal Health Companies PAC

A. KELLY B WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 4556 SATTERTON CIRCLE

City DUBLIN State OH Zip Code 43016

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, HR BUSINESS PART

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **684.00**

Date of Receipt **08 / 31 / 2013**

Transaction ID : PR9368926817

Amount of Each Receipt this Period **114.00**

P/R Deduction (\$38.00 Bi-Weekly)

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

Mailing Address 1904 SPRINGCROFT DRIVE

City FRANKLIN State TN Zip Code 37067

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

Name of Employer CARDINAL HEALTH, INC Occupation DIR, CUST SVC TECHNI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **342.00**

Date of Receipt **08 / 31 / 2013**

Transaction ID : PR9368956817

Amount of Each Receipt this Period **57.00**

P/R Deduction (\$19.00 Bi-Weekly)

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

Mailing Address 24 BONWIT ROAD

City RYE BROOK State NY Zip Code 10573

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

Name of Employer CARDINAL HEALTH, INC Occupation SVP, GM KINRAY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt **08 / 31 / 2013**

Transaction ID : PR9368966817

Amount of Each Receipt this Period **150.00**

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

SUBTOTAL of Receipts This Page (optional)..... **321.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 96 OF 102
<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 AKA Cardinal Health Companies PAC

A. JYOTHIRMAYI MAYI CHERRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 5136 ABBOTSBURY COURT
 City NEW ALBANY State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, FIN PLNG & ANAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR9393886817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. DEBBIE J J MITCHELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 ALBAN MEWS
 City NEW ALBANY State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, PUBLIC RELATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR9408996817
 Amount of Each Receipt this Period 150.00
 P/R Deduction (\$50.00 Bi-Weekly)

C. EUSEBIO ZAMORA
 Full Name (Last, First, Middle Initial)
 Mailing Address 9450 TARTAN RIDGE BLVD
 City DUBLIN State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, PHARMACY SUPPOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR9409006817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	264.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 97 OF 102
<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 AKA Cardinal Health Companies PAC

A. ROBERT KULIS
Full Name (Last, First, Middle Initial)

Mailing Address 14 ROSY FINCH PLACE

City THE WOODLANDS State TX Zip Code 77389

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

Name of Employer: CARDINAL HEALTH, INC Occupation: SVP, GM PHARMACY SOL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 08 / 31 / 2013
Transaction ID : PR9409026817

Amount of Each Receipt this Period: 150.00

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

B. DONALD M CASEY
Full Name (Last, First, Middle Initial)

Mailing Address 7708 TILLINGHAST DRIVE

City DUBLIN State OH Zip Code 43017

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

Name of Employer: CARDINAL HEALTH, INC Occupation: CEO, MEDICAL SEGMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3461.40

Date of Receipt: 08 / 31 / 2013
Transaction ID : PR9413436817

Amount of Each Receipt this Period: 576.90

P/R Deduction (\$192.30 Bi-Weekly)

C. BRIAN K MERRILL
Full Name (Last, First, Middle Initial)

Mailing Address 6376 COUNTRYWOOD PL

City RANCHO CUCAMONGA State CA Zip Code 91739

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 ▼ 360.00

Date of Receipt: 08 / 31 / 2013
Transaction ID : PR9445156817

Amount of Each Receipt this Period: 60.00

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

SUBTOTAL of Receipts This Page (optional)..... ▶ 786.90

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 98 OF 102
(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 AKA Cardinal Health Companies PAC

A. SHAUNA M LATSHAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 6069 TOURNAMENT DRIVE
 City WESTERVILLE State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 684.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR9950516817
 Amount of Each Receipt this Period 114.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. ALAN L DEUTSCHENDORF
 Full Name (Last, First, Middle Initial)
 Mailing Address 8243 WORLEY DR.
 City LEWIS CENTER State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, OPERATIONAL EXCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR9950526817
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

C. SEAN C RAYNAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 MALLARD DRIVE
 City MONROEVILLE State PA Zip Code 15146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, PHARM OPS MGMNT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt 08 / 31 / 2013
Transaction ID : PR9956316817
 Amount of Each Receipt this Period 57.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 231.00
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 99 OF 102
(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 AKA Cardinal Health Companies PAC

A. GE CAO
Full Name (Last, First, Middle Initial)
Mailing Address 5360 FORT WARD DRIVE
City NEW ALBANY State OH Zip Code 43054
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, INFO SERVICES &
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2013
Transaction ID : PR9997756817
Amount of Each Receipt this Period 75.00
P/R Deduction (\$25.00 Bi-Weekly)

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	27541.19

**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 AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. Promoting Our Republican Team PAC

Mailing Address 8331 LITTLE HARBOR DRIVE

City CINCINNATI State OH Zip Code 45244

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Promoting Our Republican Team PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2013

Transaction ID : 7567173

Amount of Each Disbursement this Period

2600.00

Direct Contribution

Full Name (Last, First, Middle Initial)

B. National Assoc of Chain Drug Stores PAC

Mailing Address 413 N Lee St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Direct Contribution

011

Candidate Name

National Assoc of Chain Drug Stores PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 14 / 2013

Transaction ID : 7583562

Amount of Each Disbursement this Period

2500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

C. HDMA PAC

Mailing Address 901 N. Glebe Rd Ste 1000

City Alexandria State VA Zip Code 22203

Purpose of Disbursement
Direct Contribution

011

Candidate Name

HDMA PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 14 / 2013

Transaction ID : 7583563

Amount of Each Disbursement this Period

2500.00

Direct Contribution

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

7600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. Alexander for Senate 2014

Mailing Address 228 S Washington Street Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Sen. Lamar Alexander

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	14	/	2013

Transaction ID : 7583564

Amount of Each Disbursement this Period

2500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

B. Diana DeGette for Congress

Mailing Address 228 2nd Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Rep. Diana DeGette

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CO District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	22	/	2013

Transaction ID : 7594275

Amount of Each Disbursement this Period

2000.00

Direct Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

4500.00

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

12100.00
