

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** C00332833
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 07 01 2009 through 12 31 2009

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

Signature of Treasurer Electronically Filed by Ronald S. Siemiontkoswki Date 01 13 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		192553.60
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	190728.68									
(c) Total Receipts (from Line 19)	63722.96	138448.04								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	254451.64	331001.64								
7. Total Disbursements (from Line 31)	38100.00	114650.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	216351.64	216351.64								
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)

Write or Type Committee Name

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

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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)	60936.68	117035.20
(ii) Unitemized	2703.52	15998.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	63640.20	133033.70
(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)	63640.20	133033.70
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	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	82.76	414.34
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	63722.96	138448.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	63722.96	138448.04

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	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.....	23000.00	68000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	15100.00	46650.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	38100.00	114650.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	38100.00	114650.00

DETAILED SUMMARY PAGE
of Disbursements

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)	63640.20	133033.70
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	63640.20	133033.70
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: (check only one)	PAGE 6 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) David Anderson	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 7977 Wingate Place	Transaction ID: 00113.C93213
	City State Zip Code Delaware OH 43015	Amount of Each Receipt this Period 807.66
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Cardinal Health, Inc	Occupation President, Gm Hospital Supply	Payroll Deduction: (57.69- /Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1557.63	

B.	Full Name (Last, First, Middle Initial) Cassandra Baker	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 1751 Barrington Rd	Transaction ID: 00113.C93217
	City State Zip Code Upper Arlington OH 43221	Amount of Each Receipt this Period 851.90
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Govt Relations Mgmt	Payroll Deduction: (60.85- /Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1585.17	

C.	Full Name (Last, First, Middle Initial) James Balzer	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 319 Millcreek Lane	Transaction ID: 00113.C93096
	City State Zip Code Washington PA 15301	Amount of Each Receipt this Period 149.24
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Cardinal Health, Inc	Occupation Mgr, Warehouse Operations	Payroll Deduction: (10.66- /Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.65	

SUBTOTAL of Receipts This Page (optional)	▶	1808.80
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: PAGE 7 / 69
(check only one)

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

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

A.

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

Mailing Address 2761 Skelton Ln

City State Zip Code
Blacklick OH 43004

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 684.70

Date of Receipt 07 / 01 / 2009

Transaction ID: 00113.C93166

Amount of Each Receipt this Period 350.74

Receipt

Payroll Deduction: (26.98- /Bi-Weekly)

B.

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

Mailing Address 1038 Mill Rd Circle

City State Zip Code
Rydal PA 19046

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3846.00

Date of Receipt 07 / 01 / 2009

Transaction ID: 00113.C93124

Amount of Each Receipt this Period 2692.20

Receipt

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

C.

Full Name (Last, First, Middle Initial)
Johnni Beckel

Mailing Address 3680 Nicoya Court Court

City State Zip Code
Lewis Center OH 43035

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 07 / 01 / 2009

Transaction ID: 00113.C93100

Amount of Each Receipt this Period 1400.00

Receipt

Payroll Deduction: (100.0- 0/Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **4442.94**

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: PAGE 8 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Laurel Beeler

Mailing Address 1723 Eagle Trl

City State Zip Code
Oxford MI 48371

FEC ID number of contributing federal political committee. C

Name of Employer Cardinal Health, Inc Occupation Dir, Sales Training Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt 07 / 01 / 2009

Transaction ID: 00113.C93160

Amount of Each Receipt this Period 350.00

Receipt

Payroll Deduction: (25.00- /Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Shelley Bird

Mailing Address 7998 Caraway Ave

City State Zip Code
Dublin OH 43016

FEC ID number of contributing federal political committee. C

Name of Employer Cardinal Health, Inc Occupation Evp, Corporate Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 07 / 01 / 2009

Transaction ID: 00113.C93098

Amount of Each Receipt this Period 1400.00

Receipt

Payroll Deduction: (100.0- /Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Mark Blake

Mailing Address 2226 Bryden Road

City State Zip Code
Columbus OH 43209

FEC ID number of contributing federal political committee. C

Name of Employer Cardinal Health, Inc Occupation Evp, Strategy & Corp Devel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 769.20

Date of Receipt 11 / 13 / 2009

Transaction ID: 00113.C94243

Amount of Each Receipt this Period 769.20

Receipt

Payroll Deduction: (192.3- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 2519.20

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
James Bonanni
Mailing Address 7511 Plum Hollow Cir
City State Zip Code
Liverpool NY 13090
FEC ID number of contributing federal political committee. **C**
Name of Employer Cardinal Health, Inc Occupation Vp, Account (health Systems)
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00
Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93078
Amount of Each Receipt this Period 140.00
Receipt
Payroll Deduction: (10.00- /Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Scott Bostick
Mailing Address 1546 Vivaldi Drive
City State Zip Code
Cardiff CA 92007
FEC ID number of contributing federal political committee. **C**
Name of Employer Cardinal Health, Inc Occupation Svp, Gm Med Dispensing Cfn
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 680.00
Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93188
Amount of Each Receipt this Period 160.00
Receipt
Payroll Deduction: (40.00- /Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mark Branday
Mailing Address 55 Island Blvd
City State Zip Code
Fox Island WA 98333
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 ▼ 617.75
Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93173
Amount of Each Receipt this Period 137.12
Receipt
Payroll Deduction: (34.28- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 437.12
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Gary Cacciatore	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 3810 Loch Glen Ct	Transaction ID: 00113.C93174
	City State Zip Code Houston TX 77059	Amount of Each Receipt this Period 480.48
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Regulatory (atty)	Payroll Deduction: (34.32- /Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 895.75	

B.	Full Name (Last, First, Middle Initial) Steven Callison	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 1368 Lincoln Road	Transaction ID: 00113.C93120
	City State Zip Code Columbus OH 43212	Amount of Each Receipt this Period 66.40
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, App Design & Devel	Payroll Deduction: (16.60- /Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.02	

C.	Full Name (Last, First, Middle Initial) Steven Callison	Date of Receipt MM / DD / YYYY 08 / 28 / 2009
	Mailing Address 1368 Lincoln Road	Transaction ID: 00113.C93425
	City State Zip Code Columbus OH 43212	Amount of Each Receipt this Period 174.30
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, App Design & Devel	Payroll Deduction: (17.43- /Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 445.32	

SUBTOTAL of Receipts This Page (optional)	721.18
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 69
(check only one)

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

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

A.

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

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 ▼ 2700.00

Date of Receipt 07 / 01 / 2009

Transaction ID: 00113.C93099

Amount of Each Receipt this Period 1400.00

Receipt

Payroll Deduction: (100.0-0/Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Kerry Clark

Mailing Address 8515 Fox Cub Lane #1502

City Cincinnati State OH Zip Code 45243

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

Name of Employer Cardinal Health, Inc Occupation Chairman & Ceo, Cah

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3846.00

Date of Receipt 07 / 01 / 2009

Transaction ID: 00113.C93129

Amount of Each Receipt this Period 1346.10

Receipt

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

C.

Full Name (Last, First, Middle Initial)
Mary Ann Clyburn

Mailing Address 24262 Cataluna Cir

City Mission Viejo State CA Zip Code 92691

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

Name of Employer Cardinal Health, Inc Occupation Sr Cnslt, Account

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 294.11

Date of Receipt 07 / 01 / 2009

Transaction ID: 00113.C93106

Amount of Each Receipt this Period 158.76

Receipt

Payroll Deduction: (11.34-/Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **2904.86**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 69

(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Jack Coffey</p> <p>Mailing Address 200 Bay Shore Drive</p> <p>City State Zip Code Rockwood TN 37854</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Cardinal Health, Inc</p> <p>Occupation Svp, Qra</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2700.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 01 / 2009</p> <p>Transaction ID: 00113.C93102</p> <p>Amount of Each Receipt this Period 1400.00</p> <p>Receipt</p> <p>Payroll Deduction: (100.0-0/Bi-Weekly)</p>
<p>B. Full Name (Last, First, Middle Initial) Mary Cooney</p> <p>Mailing Address 2211 Briarglen #507 #507</p> <p>City State Zip Code Houston TX 77027</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Cardinal Health, Inc</p> <p>Occupation Evp, Human Resources Cfn</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1700.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 01 / 2009</p> <p>Transaction ID: 00113.C93104</p> <p>Amount of Each Receipt this Period 400.00</p> <p>Receipt</p> <p>Payroll Deduction: (100.0-0/Bi-Weekly)</p>
<p>C. Full Name (Last, First, Middle Initial) Bonita Court</p> <p>Mailing Address 5392 S Cambridge Ln</p> <p>City State Zip Code Greenfield WI 53221</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Cardinal Health, Inc</p> <p>Occupation Mgr, Sales Training/process</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 399.80</p>	<p>Date of Receipt MM / DD / YYYY 07 / 01 / 2009</p> <p>Transaction ID: 00113.C93157</p> <p>Amount of Each Receipt this Period 95.68</p> <p>Receipt</p> <p>Payroll Deduction: (23.92-/Bi-Weekly)</p>

SUBTOTAL of Receipts This Page (optional) ▶

1895.68

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 13 / 69

(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Jody Davids Mailing Address 87 East Bay St. Apt. B City Charleston State SC Zip Code 29401 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Gss And Cio Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2009 Transaction ID: 00113.C93211 Amount of Each Receipt this Period 350.00 Receipt Payroll Deduction: (50.00- /Bi-Weekly)
B.	Full Name (Last, First, Middle Initial) Ted Dibiase Mailing Address 4954 Rosegate Court Island Drive City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Hr Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1614.88	Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2009 Transaction ID: 00113.C93218 Amount of Each Receipt this Period 856.80 Receipt Payroll Deduction: (61.20- /Bi-Weekly)
C.	Full Name (Last, First, Middle Initial) Nancy Dixon Mailing Address 7002 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 Vp, Ethics And Compliance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 288.36	Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2009 Transaction ID: 00113.C93097 Amount of Each Receipt this Period 149.52 Receipt Payroll Deduction: (10.68- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶

1356.32

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 14 / 69
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Michele Donatich

Mailing Address 520 Penny Lane

City State Zip Code
Grayslake IL 60030

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

Name of Employer Cardinal Health, Inc Occupation Dir, Customer Advocacy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 337.11

Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93109
Amount of Each Receipt this Period 178.92
Receipt
Payroll Deduction: (12.78- /Bi-Weekly)

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

Mailing Address 6825 Macneil Dr

City State Zip Code
Dublin OH 43017

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

Name of Employer Cardinal Health, Inc Occupation Evp, Ops - Medical Segment

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93144
Amount of Each Receipt this Period 280.00
Receipt
Payroll Deduction: (20.00- /Bi-Weekly)

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

Mailing Address 6146 Balmoral Drive

City State Zip Code
Dublin OH 43017

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

Name of Employer Cardinal Health, Inc Occupation Svp, Branded Purchasing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93149
Amount of Each Receipt this Period 280.00
Receipt
Payroll Deduction: (20.00- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **738.92**

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

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

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

FOR LINE NUMBER: PAGE 15 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
 Leeann Evensen
 Mailing Address 1423 Shady Valley
 City State Zip Code
 Sugar Land TX 77479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Mgr, App Design & Devel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93115
 Amount of Each Receipt this Period 210.00
 Receipt
 Payroll Deduction: (15.00- /Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
 Stephen Falk
 Mailing Address 2480 Sandover Rd
 City State Zip Code
 Columbus OH 43220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Evp & General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93101
 Amount of Each Receipt this Period 1400.00
 Receipt
 Payroll Deduction: (100.0- /Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
 Nathaniel Filler
 Mailing Address 7639 Presidium Loop
 City State Zip Code
 Galena OH 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Mgr, State Govt Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93113
 Amount of Each Receipt this Period 210.00
 Receipt
 Payroll Deduction: (15.00- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 1820.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 16 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
 Stephen Flannery
 Mailing Address 275 East Center St
 City State Zip Code
 Shavertown PA 18708
 Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 01 / 2009
Transaction ID: 00113.C93123
 Amount of Each Receipt this Period
 266.14
 Receipt
 Payroll Deduction: (19.01-
 /Bi-Weekly)
 Name of Employer Cardinal Health, Inc Occupation Vp, Direct Sales Mgmt
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 504.55

B. Full Name (Last, First, Middle Initial)
 Bryan Focht
 Mailing Address 8553 Tartan Fields
 City State Zip Code
 Dublin OH 43017
 Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 01 / 2009
Transaction ID: 00113.C93221
 Amount of Each Receipt this Period
 112.00
 Receipt
 Payroll Deduction: (8.00/-
 Bi-Weekly)
 Name of Employer Cardinal Health, Inc Occupation Vp, General Acctg
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 216.00

C. Full Name (Last, First, Middle Initial)
 Ivan Fong
 Mailing Address 21 S. Parkview Ave.
 City State Zip Code
 Columbus OH 43209
 Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 01 / 2009
Transaction ID: 90708.C92769
 Amount of Each Receipt this Period
 -192.30
 Receipt
 Payroll Deduction: (-192.-
 30/Bi-Weekly)
 Name of Employer Cardinal Health, Inc Occupation Chief Legal Officer
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 2307.60

SUBTOTAL of Receipts This Page (optional) ► 185.84
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 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Ivan Fong	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 21 S. Parkview Ave.	Transaction ID: 90708.C92770
	City State Zip Code Columbus OH 43209	Amount of Each Receipt this Period 192.30
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (192.30/Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Chief Legal Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2499.90	

B.	Full Name (Last, First, Middle Initial) Joshua Gaines	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 5721 Clover Lane Drive	Transaction ID: 00113.C93158
	City State Zip Code Westerville OH 43081	Amount of Each Receipt this Period 275.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (25.00/Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Svp, Assoc General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) Joshua Gaines	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 5721 Clover Lane Drive	Transaction ID: 00113.C94408
	City State Zip Code Westerville OH 43081	Amount of Each Receipt this Period 87.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (29.00/Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Svp, Assoc General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 687.00	

SUBTOTAL of Receipts This Page (optional)	554.30
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 18 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
 Robert Giacalone
 Mailing Address 7471 Balfoure Circle
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Svp, Reg Affairs/chf Reg Cnsl
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1226.85
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93191
 Amount of Each Receipt this Period 665.28
 Receipt
 Payroll Deduction: (47.52- /Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
 James Gill
 Mailing Address 1529 Woodvale Avenue
 City State Zip Code
 Deerfield IL 60015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Vp, Gm Strategic Initiatives
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93116
 Amount of Each Receipt this Period 210.00
 Receipt
 Payroll Deduction: (15.00- /Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
 David Goldsberry
 Mailing Address 321 St Andrews Ln
 City State Zip Code
 Gurnee IL 60031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Vp, Direct Sales Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 524.13
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93154
 Amount of Each Receipt this Period 256.08
 Receipt
 Payroll Deduction: (21.34- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1131.36**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 69
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A.	Full Name (Last, First, Middle Initial) David Goldsberry		Date of Receipt MM / DD / YYYY 12 / 18 / 2009		
	Mailing Address 321 St Andrews Ln		Transaction ID: 00113.C94560		
	City Gurnee	State IL	Zip Code 60031	Amount of Each Receipt this Period 76.00	
	FEC ID number of contributing federal political committee. C		Receipt		
Name of Employer Cardinal Health, Inc		Occupation Vp, Direct Sales Mgmt		Payroll Deduction: (38.00- /Bi-Weekly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.13			

B.	Full Name (Last, First, Middle Initial) David Gonzales		Date of Receipt MM / DD / YYYY 07 / 01 / 2009		
	Mailing Address 384 Colorado Drive		Transaction ID: 00113.C93209		
	City Cedar Creek	State TX	Zip Code 78612	Amount of Each Receipt this Period 700.00	
	FEC ID number of contributing federal political committee. C		Receipt		
Name of Employer Cardinal Health, Inc		Occupation Dir, State Govt Relations		Payroll Deduction: (50.00- /Bi-Weekly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1350.00			

C.	Full Name (Last, First, Middle Initial) Carolyn Grant		Date of Receipt MM / DD / YYYY 07 / 01 / 2009		
	Mailing Address 6869 Meadow Glen Dr		Transaction ID: 00113.C93175		
	City Westerville	State OH	Zip Code 43082	Amount of Each Receipt this Period 490.00	
	FEC ID number of contributing federal political committee. C		Receipt		
Name of Employer Cardinal Health, Inc		Occupation Dir, Fed Govt Relations		Payroll Deduction: (35.00- /Bi-Weekly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 945.00			

SUBTOTAL of Receipts This Page (optional)	▶	1266.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

John Grisdale

Mailing Address 7135 Fodor

City State Zip Code
New Albany OH 43054

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 540.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: 00113.C93147

Amount of Each Receipt this Period

280.00

Receipt

Payroll Deduction: (20.00-
/Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Michael Groesbeck

Mailing Address 33916 North Summerfields Drive

City State Zip Code
Gurnee IL 60031

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 565.21

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: 00113.C93153

Amount of Each Receipt this Period

297.78

Receipt

Payroll Deduction: (21.27-
/Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Gregory Halvacs

Mailing Address 4964 Olentangy River
River Rd

City State Zip Code
Delaware OH 43015

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: 00113.C93206

Amount of Each Receipt this Period

600.00

Receipt

Payroll Deduction: (50.00-
/Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶

1177.78

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 69

(check only one)

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

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

A.

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

Mailing Address 4964 Olentangy River
River Rd

City State Zip Code
Delaware OH 43015

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1288.00

Date of Receipt

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

Transaction ID: 00113.C94513

Amount of Each Receipt this Period

38.00

Receipt

Payroll Deduction: (19.00-
/Bi-Weekly)

B.

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

Mailing Address 5622 Dorsey Drive

City State Zip Code
Columbus OH 43235

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 659.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 1 / 2 0 0 9

Transaction ID: 00113.C93159

Amount of Each Receipt this Period

350.00

Receipt

Payroll Deduction: (25.00-
/Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Richard Heard

Mailing Address 8106 Bulrush Canyon Trail
Trail

City State Zip Code
Katy TX 77494

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 675.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 1 / 2 0 0 9

Transaction ID: 00113.C93162

Amount of Each Receipt this Period

350.00

Receipt

Payroll Deduction: (25.00-
/Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶

738.00

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 23 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Mark Henderson	Date of Receipt MM / DD / YYYY 07 / 24 / 2009
	Mailing Address 6308 Mccoy	Transaction ID: 00113.C93164
	City State Zip Code Shawnee KS 66226	Amount of Each Receipt this Period 25.41
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Account Mgmt	Payroll Deduction: (25.41- /Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.04	

B.	Full Name (Last, First, Middle Initial) Mark Henderson	Date of Receipt MM / DD / YYYY 08 / 14 / 2009
	Mailing Address 6308 Mccoy	Transaction ID: 00113.C93265
	City State Zip Code Shawnee KS 66226	Amount of Each Receipt this Period 150.37
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Account Mgmt	Payroll Deduction: (13.67- /Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 367.41	

C.	Full Name (Last, First, Middle Initial) James Hinrichs	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 3571 Corte Rosado	Transaction ID: 00113.C93142
	City State Zip Code Carlsbad CA 92009	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Cardinal Health, Inc	Occupation Controller Cfn	Payroll Deduction: (20.00- /Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional)	▶	255.78
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) James Homan	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 520 Eden Park Drive Apt # 17103	Transaction ID: 00113.C93111
	City State Zip Code Franklin TN 37067	Amount of Each Receipt this Period 159.84
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Cardinal Health, Inc Occupation Exec, Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.49	Payroll Deduction: (13.32- /Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) James Homan	Date of Receipt MM / DD / YYYY 08 / 28 / 2009
	Mailing Address 520 Eden Park Drive Apt # 17103	Transaction ID: 00113.C93466
	City State Zip Code Franklin TN 37067	Amount of Each Receipt this Period 29.47
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Cardinal Health, Inc Occupation Exec, Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 389.96	Payroll Deduction: (29.47- /Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) James Homan	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 520 Eden Park Drive Apt # 17103	Transaction ID: 00113.C94399
	City State Zip Code Franklin TN 37067	Amount of Each Receipt this Period 22.74
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Cardinal Health, Inc Occupation Exec, Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 412.70	Payroll Deduction: (22.74- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	212.05
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: PAGE 25 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Justin Hooper

Mailing Address 7670 Early Meadow Rd

City State Zip Code
Westerville OH 43082

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

Name of Employer Cardinal Health, Inc Occupation Dir, It Prog/proj Mgmt

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **07 / 01 / 2009**
Transaction ID: 00113.C93081

Amount of Each Receipt this Period **140.00**

Receipt
 Payroll Deduction: (10.00- /Bi-Weekly)

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

Mailing Address 305 Vine Ct

City State Zip Code
Mandeville LA 70448

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

Name of Employer Cardinal Health, Inc Occupation Cnslt, Franchise Operations

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt **07 / 01 / 2009**
Transaction ID: 00113.C93114

Amount of Each Receipt this Period **210.00**

Receipt
 Payroll Deduction: (15.00- /Bi-Weekly)

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

Mailing Address 10091 Juliana Circle

City State Zip Code
Powell OH 43065

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

Name of Employer Cardinal Health, Inc Occupation Dir, Enterprise Architecture

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **07 / 01 / 2009**
Transaction ID: 00113.C93082

Amount of Each Receipt this Period **140.00**

Receipt
 Payroll Deduction: (10.00- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **490.00**

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 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Anthony Hunt		Date of Receipt
	Mailing Address 10208 Hollybrook Dr		<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Charlotte	NC	28277
	FEC ID number of contributing federal political committee. C		Transaction ID: 00113.C93117
Name of Employer Cardinal Health, Inc		Occupation Vp, Account (strat Accts Ips)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="290.04"/>	<input type="text" value="106.05"/>
			Receipt Payroll Deduction: (15.15- /Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Anthony Hunt		Date of Receipt
	Mailing Address 10208 Hollybrook Dr		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Charlotte	NC	28277
	FEC ID number of contributing federal political committee. C		Transaction ID: 00113.C93865
Name of Employer Cardinal Health, Inc		Occupation Vp, Account (strat Accts Ips)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="310.44"/>	<input type="text" value="20.40"/>
			Receipt Payroll Deduction: (20.40- /Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Anthony Hunt		Date of Receipt
	Mailing Address 10208 Hollybrook Dr		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Charlotte	NC	28277
	FEC ID number of contributing federal political committee. C		Transaction ID: 00113.C93971
Name of Employer Cardinal Health, Inc		Occupation Vp, Account (strat Accts Ips)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="327.74"/>	<input type="text" value="17.30"/>
			Receipt Payroll Deduction: (17.30- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="143.75"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Anthony Hunt	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 10208 Hollybrook Dr	Transaction ID: 00113.C94104
	City State Zip Code Charlotte NC 28277	Amount of Each Receipt this Period 48.09
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (16.03- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Vp, Account (strat Accts Ips)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.83	

B.	Full Name (Last, First, Middle Initial) Anthony Hunt	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 10208 Hollybrook Dr	Transaction ID: 00113.C94366
	City State Zip Code Charlotte NC 28277	Amount of Each Receipt this Period 34.02
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (17.01- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Vp, Account (strat Accts Ips)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 409.85	

C.	Full Name (Last, First, Middle Initial) Stephen Inacker	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 1490 S Ridge Road	Transaction ID: 90708.C92871
	City State Zip Code Lake Forest IL 60045	Amount of Each Receipt this Period 64.16
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (32.08- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation President, Gm Presource Prdcts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 447.98	

SUBTOTAL of Receipts This Page (optional)	146.27
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 28 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Stephen Inacker
 Mailing Address 1490 S Ridge Road
 City State Zip Code
 Lake Forest IL 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation President, Gm Presource Prdcts
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 869.18
 Date of Receipt 07 / 24 / 2009
Transaction ID: 00113.C93176
 Amount of Each Receipt this Period 421.20
 Receipt
 Payroll Deduction: (35.10- /Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Brian Jackson
 Mailing Address 9055 Tartan Flds Dr
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Svp, National Chain Accounts
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 432.00
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93118
 Amount of Each Receipt this Period 224.00
 Receipt
 Payroll Deduction: (16.00- /Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Stephen Johnson
 Mailing Address 221 W Lancaster Ave # 2012 # 2012
 City State Zip Code
 Fort Worth TX 76102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Vp, Strategic Plng/execution
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 845.61
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93171
 Amount of Each Receipt this Period 444.92
 Receipt
 Payroll Deduction: (31.78- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 1090.12
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 29 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Cheryl Kahn

Mailing Address 3049 Maple Leaf

City State Zip Code
Glenview IL 60026

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: 00113.C93085

Amount of Each Receipt this Period
140.00

Receipt

Payroll Deduction: (10.00-
/Bi-Weekly)

B.

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

Mailing Address 7160 Temperance Point St
Point St

City State Zip Code
Westerville OH 43082

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

Name of Employer Cardinal Health, Inc Occupation Ceo, Pharmaceutical Segment

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5192.10

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: 00113.C93126

Amount of Each Receipt this Period
2692.20

Receipt

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

C.

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

Mailing Address 4783 Vista Ridge Dr

City State Zip Code
Dublin OH 43017

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

Name of Employer Cardinal Health, Inc Occupation Svp, Compliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1905.70

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: 00113.C93105

Amount of Each Receipt this Period
1404.20

Receipt

Payroll Deduction: (100.3-
0/Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **4236.40**

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 30 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Kenneth Kohler

Mailing Address 694 Hampton Rd
Grosse

City State Zip Code
Grosse Pte. Woods MI 48236

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00

Date of Receipt MM / DD / YYYY
07 / 01 / 2009

Transaction ID: 00113.C93087

Amount of Each Receipt this Period 140.00

Receipt

Payroll Deduction: (10.00- /Bi-Weekly)

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

Mailing Address 4650 Links Village D Unit A704
Unit A704

City State Zip Code
Ponce Inlet FL 32127

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00

Date of Receipt MM / DD / YYYY
07 / 01 / 2009

Transaction ID: 00113.C93079

Amount of Each Receipt this Period 140.00

Receipt

Payroll Deduction: (10.00- /Bi-Weekly)

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

Mailing Address 37248 N Deerpath Dr

City State Zip Code
Lake Villa IL 60046

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 288.00

Date of Receipt MM / DD / YYYY
07 / 01 / 2009

Transaction ID: 00113.C93107

Amount of Each Receipt this Period 132.00

Receipt

Payroll Deduction: (12.00- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 412.00

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 31 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Cornelius Lane

Mailing Address 15 Southridge

City State Zip Code
St Louis MO 63122

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

Name of Employer Cardinal Health, Inc Occupation Sr Cnslt, Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt MM / DD / YYYY
07 / 01 / 2009

Transaction ID: 00113.C93090

Amount of Each Receipt this Period 140.00

Receipt

Payroll Deduction: (10.00- /Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Margaret Lavalley

Mailing Address 9410 Culross Ct

City State Zip Code
Dublin OH 43017

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

Name of Employer Cardinal Health, Inc Occupation Svp, Hr Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt MM / DD / YYYY
07 / 01 / 2009

Transaction ID: 00113.C93205

Amount of Each Receipt this Period 700.00

Receipt

Payroll Deduction: (50.00- /Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Steve Lawrence

Mailing Address 4868 Carrigan Ridge

City State Zip Code
Dublin OH 43017

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

Name of Employer Cardinal Health, Inc Occupation Svp, Retail Independent Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt MM / DD / YYYY
07 / 01 / 2009

Transaction ID: 00113.C93103

Amount of Each Receipt this Period 1400.00

Receipt

Payroll Deduction: (100.0- 0/Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 2240.00

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 32 / 69
(check only one)

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

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

A.

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

Mailing Address 95 Arboretum Dr

City State Zip Code
North Barrington IL 60010

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

Name of Employer Cardinal Health, Inc Occupation Vp, Gm V Mueller/onsite Cfn

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.50

Date of Receipt 07 / 01 / 2009

Transaction ID: 00113.C93155

Amount of Each Receipt this Period 94.48

Receipt

Payroll Deduction: (23.62- /Bi-Weekly)

B.

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

Mailing Address 550 E Rosemary

City State Zip Code
Lake Forest IL 60045

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 ▼ 5192.10

Date of Receipt 07 / 01 / 2009

Transaction ID: 00113.C93127

Amount of Each Receipt this Period 2692.20

Receipt

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

C.

Full Name (Last, First, Middle Initial)
Donna Mann

Mailing Address 6666 Mcvey Blvd

City State Zip Code
West Worthington OH 43235

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

Name of Employer Cardinal Health, Inc Occupation Dir, Hr Service Delivery

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 674.49

Date of Receipt 07 / 01 / 2009

Transaction ID: 00113.C93165

Amount of Each Receipt this Period 361.06

Receipt

Payroll Deduction: (25.79- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **3147.74**

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 33 / 69
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Jessica Mayer	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 4852 Carrigan Ridge	Transaction ID: 00113.C93169
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 420.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (30.00- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Vp, Bus Mgmt (atty)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	

B.	Full Name (Last, First, Middle Initial) Deborah McBride	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 9352 Blackfoot Trail	Transaction ID: 00113.C93222
	City State Zip Code Williamsburg MO 63388	Amount of Each Receipt this Period 92.90
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (9.29- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Dir, Real Estate Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.16	

C.	Full Name (Last, First, Middle Initial) Deborah McBride	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 9352 Blackfoot Trail	Transaction ID: 00113.C94191
	City State Zip Code Williamsburg MO 63388	Amount of Each Receipt this Period 4.64
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (4.64- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Dir, Real Estate Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.80	

SUBTOTAL of Receipts This Page (optional)	517.54
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 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Janice Mccampbell	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 8001 Millenium Dr	Transaction ID: 00113.C93177
	City State Zip Code Raleigh NC 27614	Amount of Each Receipt this Period 147.40
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (36.85- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Vp, Engineering Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 599.45	

B.	Full Name (Last, First, Middle Initial) Lindy Mclean	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 7272 Black Abbey Ct	Transaction ID: 00113.C93172
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 479.08
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (34.22- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Sr Cnslt, Account	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 903.72	

C.	Full Name (Last, First, Middle Initial) Steven Merkin	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 1481 Country Ln	Transaction ID: 00113.C93189
	City State Zip Code Deerfield IL 60015	Amount of Each Receipt this Period 560.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (40.00- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Svp, Hr Bus Partner Medical	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1080.00	

SUBTOTAL of Receipts This Page (optional)	1186.48
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 35 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Craig Morford
Mailing Address 5565 Lake Shore Ave,
City State Zip Code
Westerville OH 43082
FEC ID number of contributing federal political committee. **C**
Name of Employer Cardinal Health, Inc Occupation Chief Compliance/legal Officer
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3461.40
Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93125
Amount of Each Receipt this Period 2692.20
Receipt
Payroll Deduction: (192.30/Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Patricia Morrison
Mailing Address 55 East Erie #3801
City State Zip Code
Chicago IL 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 ▼ 500.00
Date of Receipt 08 / 28 / 2009
Transaction ID: 00113.C93499
Amount of Each Receipt this Period 500.00
Receipt
Payroll Deduction: (50.00/Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Marc Mullen
Mailing Address 1650 Sherborne Lane
City State Zip Code
Powell OH 43065
FEC ID number of contributing federal political committee. **C**
Name of Employer Cardinal Health, Inc Occupation SVP, Sales & Marketing
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1350.00
Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93210
Amount of Each Receipt this Period 700.00
Receipt
Payroll Deduction: (50.00/Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 3892.20
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 36 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
 Robert Murphy
 Mailing Address 10201 Sylvian Dr
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Vp, Direct Sales Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93093
 Amount of Each Receipt this Period 140.00
 Receipt
 Payroll Deduction: (10.00- /Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
 Jimmy Neil
 Mailing Address 328 Claydon Way
 City State Zip Code
 Sacramento CA 95864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Vp, Mktg & Product Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93088
 Amount of Each Receipt this Period 140.00
 Receipt
 Payroll Deduction: (10.00- /Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
 Frederick Nelson
 Mailing Address 7303 Deacon Court
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Vp, Op Excellence - Bb Prgm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1087.45
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93190
 Amount of Each Receipt this Period 568.40
 Receipt
 Payroll Deduction: (40.60- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **848.40**
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 37 / 69
(check only one)

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

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

A.

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

Mailing Address 1740 Dylan Way

City State Zip Code
Encinitas CA 92024

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

Name of Employer Cardinal Health, Inc Occupation Svp, Software Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

Date of Receipt 07 / 01 / 2009

Transaction ID: 00113.C93151

Amount of Each Receipt this Period 80.00

Receipt

Payroll Deduction: (20.00- /Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Mark Overman

Mailing Address 900 Wyndham Hill Ct

City State Zip Code
Southlake TX 76092

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.27

Date of Receipt 07 / 01 / 2009

Transaction ID: 00113.C93121

Amount of Each Receipt this Period 253.82

Receipt

Payroll Deduction: (18.13- /Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Thomas Perrine

Mailing Address 7249 Landon Lane

City State Zip Code
New Albany OH 43054

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

Name of Employer Cardinal Health, Inc Occupation Svp, It Business Partners

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 07 / 01 / 2009

Transaction ID: 00113.C93207

Amount of Each Receipt this Period 700.00

Receipt

Payroll Deduction: (50.00- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1033.82**

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 38 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Vicki Perryman
 Mailing Address 2000 Loch Lomond Drive
 City State Zip Code
Powell OH 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Svp, Customer Service
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93146
 Amount of Each Receipt this Period 280.00
 Receipt
 Payroll Deduction: (20.00- /Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mark Phillips
 Mailing Address 1009 Morningside Dr
 City State Zip Code
Alpharetta GA 30022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Dir, General Acctg
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93080
 Amount of Each Receipt this Period 140.00
 Receipt
 Payroll Deduction: (10.00- /Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mark Pilkington
 Mailing Address 4367 Hickory Rock Dr
 City State Zip Code
Powell OH 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 ▼ 270.00
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93083
 Amount of Each Receipt this Period 140.00
 Receipt
 Payroll Deduction: (10.00- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 560.00
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 39 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 5014 Closeburn Ct

City State Zip Code
Dublin OH 43017

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

Name of Employer Cardinal Health, Inc Occupation Svp, Strategy

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 363.42

Date of Receipt: 07 / 01 / 2009
Transaction ID: 00113.C93112
Amount of Each Receipt this Period: 188.44
Receipt
Payroll Deduction: (13.46- /Bi-Weekly)

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

Mailing Address 3526 Pembroke Dr

City State Zip Code
Richmond TX 77469

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1779.79

Date of Receipt: 07 / 01 / 2009
Transaction ID: 00113.C93220
Amount of Each Receipt this Period: 969.22
Receipt
Payroll Deduction: (69.23- /Bi-Weekly)

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

Mailing Address 45 Knob Hill Circle

City State Zip Code
Canton MA 02021

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

Name of Employer Cardinal Health, Inc Occupation Mgr, Territory Sales

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 07 / 01 / 2009
Transaction ID: 00113.C93091
Amount of Each Receipt this Period: 140.00
Receipt
Payroll Deduction: (10.00- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 1297.66

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 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Kathy Popejoy	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 11127 W 59th Ave	Transaction ID: 00113.C93156
	City State Zip Code Arvada CO 80004	Amount of Each Receipt this Period 332.64
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (23.76- /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 ▼ 624.52	

B.	Full Name (Last, First, Middle Initial) John Rademacher	Date of Receipt MM / DD / YYYY 10 / 19 / 2009
	Mailing Address 5006 Rosalind Lane	Transaction ID: 00113.C93953
	City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (100.0- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation President, Gm Spec & Nps	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) William Rampy	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 103 Foxglove Ln	Transaction ID: 90708.C92910
	City State Zip Code Bentonville AR 72712	Amount of Each Receipt this Period 56.15
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (56.15- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Vp, Mktg & Product Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 755.23	

SUBTOTAL of Receipts This Page (optional)	▶	988.79
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 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) William Rampy	Date of Receipt MM / DD / YYYY 07 / 20 / 2009
	Mailing Address 103 Foxglove Ln	Transaction ID: 00113.C93212
	City State Zip Code Bentonville AR 72712	Amount of Each Receipt this Period 367.36
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (52.48- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Vp, Mktg & Product Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1122.59	

B.	Full Name (Last, First, Middle Initial) William Rampy	Date of Receipt MM / DD / YYYY 09 / 23 / 2009
	Mailing Address 103 Foxglove Ln	Transaction ID: 00113.C93787
	City State Zip Code Bentonville AR 72712	Amount of Each Receipt this Period 61.02
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (61.02- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Vp, Mktg & Product Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1183.61	

C.	Full Name (Last, First, Middle Initial) William Rampy	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 103 Foxglove Ln	Transaction ID: 00113.C94180
	City State Zip Code Bentonville AR 72712	Amount of Each Receipt this Period 54.33
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (54.33- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Vp, Mktg & Product Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1237.94	

SUBTOTAL of Receipts This Page (optional)	▶	482.71
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 / 69

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
William Rampy

Mailing Address 103 Foxglove Ln

City State Zip Code
Bentonville AR 72712

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1459.06

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: 00113.C94313

Amount of Each Receipt this Period

221.12

Receipt

Payroll Deduction: (55.28-
/Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Robert Randklev

Mailing Address 2711 Pebble Stone

City State Zip Code
Grapevine TX 76051

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

Name of Employer Cardinal Health, Inc Occupation Svp, Distribution Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 1 / 2 0 0 9

Transaction ID: 00113.C93150

Amount of Each Receipt this Period

280.00

Receipt

Payroll Deduction: (20.00-
/Bi-Weekly)

C.

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

Mailing Address 9098 Mediterra Place

City State Zip Code
Dublin OH 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 ▼ 540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 1 / 2 0 0 9

Transaction ID: 00113.C93140

Amount of Each Receipt this Period

280.00

Receipt

Payroll Deduction: (20.00-
/Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶

781.12

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 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) David Render	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 6909 Maris Ct	Transaction ID: 00113.C93110
	City State Zip Code Burluson TX 76028	Amount of Each Receipt this Period 186.06
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Cardinal Health, Inc	Occupation Dir, Operations Mgmt	Payroll Deduction: (13.29- /Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.87	

B.	Full Name (Last, First, Middle Initial) Cynthia Rhomberg	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 9379 Redan Court	Transaction ID: 00113.C93145
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 220.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Marketing Mgmt	Payroll Deduction: (20.00- /Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

C.	Full Name (Last, First, Middle Initial) Cynthia Rhomberg	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 9379 Redan Court	Transaction ID: 00113.C94419
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 114.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Marketing Mgmt	Payroll Deduction: (38.00- /Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 594.00	

SUBTOTAL of Receipts This Page (optional)	▶	520.06
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 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Kristina Robinson	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 8187 Shannon Glen Blvd Blvd	Transaction ID: 00113.C93108
	City Dublin State OH Zip Code 43016	Amount of Each Receipt this Period 177.10
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Cardinal Health, Inc Occupation Dir, It Prog/proj Mgmt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 332.34	Payroll Deduction: (12.65- /Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Mark Rosenbaum	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 6565 Lockhart Lane	Transaction ID: 00113.C93131
	City Dublin State OH Zip Code 43017	Amount of Each Receipt this Period 2692.20
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Cardinal Health, Inc Occupation Chief Customer Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 5192.10	Payroll Deduction: (192.3- 0/Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Annlea Rumpfola	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 8314 Davington Dr	Transaction ID: 00113.C93076
	City Dublin State OH Zip Code 43017	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Cardinal Health, Inc Occupation Vp, App Design & Devel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 270.00	Payroll Deduction: (10.00- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	3009.30
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 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
 David Schlotterbeck
 Mailing Address 12 Hermitage Lane
 City State Zip Code
 Laguna Niguel CA 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Chief Executive Officer Cfn
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3269.10
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93128
 Amount of Each Receipt this Period 769.20
 Receipt
 Payroll Deduction: (192.30/Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
 Frank Segrave
 Mailing Address 5371 Gordon Way
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Evp, Strategic Sourcing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1039.50
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93179
 Amount of Each Receipt this Period 539.00
 Receipt
 Payroll Deduction: (38.50/Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
 Steven Seide
 Mailing Address 30 Nutmeg Ln
 City State Zip Code
 North Andover MA 01845
 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 ▼ 484.08
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93122
 Amount of Each Receipt this Period 259.28
 Receipt
 Payroll Deduction: (18.52/Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 1567.48
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 / 69
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Kendell Sherrer

Mailing Address 7720 Heatherwood Ln

City State Zip Code
Dublin OH 43017

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

Name of Employer Cardinal Health, Inc Occupation Vp, Hr Business Partners

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 530.56

Date of Receipt: 07 / 01 / 2009
Transaction ID: 00113.C93152
Amount of Each Receipt this Period: 281.54
Receipt
Payroll Deduction: (20.11- /Bi-Weekly)

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

Mailing Address 11014 Black Falls Ct

City State Zip Code
Sugar Land TX 77478

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

Name of Employer Cardinal Health, Inc Occupation Mgr, Infrastructure Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 07 / 01 / 2009
Transaction ID: 00113.C93208
Amount of Each Receipt this Period: 250.00
Receipt
Payroll Deduction: (50.00- /Bi-Weekly)

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

Mailing Address 8501 Heatherwood Drive

City State Zip Code
Savannah GA 31406

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

Name of Employer Cardinal Health, Inc Occupation Sr Cnslt, Business Analysis

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.66

Date of Receipt: 07 / 01 / 2009
Transaction ID: 00113.C93095
Amount of Each Receipt this Period: 148.12
Receipt
Payroll Deduction: (10.58- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **679.66**

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 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
 Joan Stafslie
 Mailing Address 3140 Dusty Trail
 City State Zip Code
 Olivenhain CA 92024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Evp, General Counsel Cfn
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93161
 Amount of Each Receipt this Period 100.00
 Receipt
 Payroll Deduction: (25.00- /Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
 Mark Stauffer
 Mailing Address 2275 La Amatista Road
 City State Zip Code
 Del Mar CA 92014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Chief Compliance Officer Cfn
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1033.50
 Date of Receipt 07 / 01 / 2009
Transaction ID: 00113.C93219
 Amount of Each Receipt this Period 247.16
 Receipt
 Payroll Deduction: (61.79- /Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
 Greg Storm
 Mailing Address 7703 E 85th St
 City State Zip Code
 Tulsa OK 74133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardinal Health, Inc Occupation Exec, Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.73
 Date of Receipt 07 / 01 / 2009
Transaction ID: 90708.C92856
 Amount of Each Receipt this Period 23.85
 Receipt
 Payroll Deduction: (23.85- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **371.01**
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 48 / 69

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Greg Storm

Mailing Address 7703 E 85th St

City State Zip Code
Tulsa OK 74133

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

Name of Employer Cardinal Health, Inc
Occupation Exec, Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 316.86

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 20 / 2009

Transaction ID: 90727.C93015

Amount of Each Receipt this Period

26.13

Receipt

Payroll Deduction: (26.13-
/Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Greg Storm

Mailing Address 7703 E 85th St

City State Zip Code
Tulsa OK 74133

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

Name of Employer Cardinal Health, Inc
Occupation Exec, Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 354.64

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 24 / 2009

Transaction ID: 00113.C93178

Amount of Each Receipt this Period

37.78

Receipt

Payroll Deduction: (37.78-
/Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Greg Storm

Mailing Address 7703 E 85th St

City State Zip Code
Tulsa OK 74133

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

Name of Employer Cardinal Health, Inc
Occupation Exec, Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 443.50

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 14 / 2009

Transaction ID: 00113.C93266

Amount of Each Receipt this Period

88.86

Receipt

Payroll Deduction: (14.81-
/Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶

152.77

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 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Greg Storm	Date of Receipt MM / DD / YYYY 08 / 28 / 2009
	Mailing Address 7703 E 85th St	Transaction ID: 00113.C93456
	City State Zip Code Tulsa OK 74133	Amount of Each Receipt this Period 90.48
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (22.62- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Exec, Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 533.98	

B.	Full Name (Last, First, Middle Initial) Greg Storm	Date of Receipt MM / DD / YYYY 12 / 30 / 2009
	Mailing Address 7703 E 85th St	Transaction ID: 00113.C94740
	City State Zip Code Tulsa OK 74133	Amount of Each Receipt this Period 65.72
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (65.72- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Exec, Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 599.70	

C.	Full Name (Last, First, Middle Initial) Robert Summers	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 146 Chasely Circle	Transaction ID: 00113.C93170
	City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 424.90
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (30.35- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Vp, Marketing Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 804.01	

SUBTOTAL of Receipts This Page (optional)	581.10
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 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Michael Synor	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 31772 Fairway Dr N	Transaction ID: 00113.C93077
	City State Zip Code Foristell MO 63348	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (10.00- /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 ▼ 270.00	

B.	Full Name (Last, First, Middle Initial) Mary Jane Tew	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 6315 Duffy Rd	Transaction ID: 00113.C93163
	City State Zip Code Delaware OH 43015	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (25.00- /Bi-Weekly)
Name of Employer Cardinal Health, Inc	Occupation Vp, Customer Service Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

C.	Full Name (Last, First, Middle Initial) Brian Thomas	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 5925 Boulder Bluff	Transaction ID: 90708.C92804
	City State Zip Code Cumming GA 30040	Amount of Each Receipt this Period 11.11
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (11.11- /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 ▼ 161.25	

SUBTOTAL of Receipts This Page (optional)	501.11
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 51 / 69
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Brian Thomas	Date of Receipt MM / DD / YYYY 07 / 20 / 2009
	Mailing Address 5925 Boulder Bluff	Transaction ID: 00113.C93374
	City State Zip Code Cumming GA 30040	Amount of Each Receipt this Period 65.73
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (9.39/- 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 ▼ 226.98	

B.	Full Name (Last, First, Middle Initial) Brian Thomas	Date of Receipt MM / DD / YYYY 07 / 24 / 2009
	Mailing Address 5925 Boulder Bluff	Transaction ID: 00113.C93119
	City State Zip Code Cumming GA 30040	Amount of Each Receipt this Period 16.15
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (16.15- /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 ▼ 243.13	

C.	Full Name (Last, First, Middle Initial) Brian Thomas	Date of Receipt MM / DD / YYYY 08 / 28 / 2009
	Mailing Address 5925 Boulder Bluff	Transaction ID: 00113.C93424
	City State Zip Code Cumming GA 30040	Amount of Each Receipt this Period 17.09
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (17.09- /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 ▼ 260.22	

SUBTOTAL of Receipts This Page (optional)	98.97
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 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Brian Thomas	Date of Receipt MM / DD / YYYY 09 / 23 / 2009
	Mailing Address 5925 Boulder Bluff	Transaction ID: 00113.C93702
	City State Zip Code Cumming GA 30040	Amount of Each Receipt this Period 16.66
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (16.66- /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 ▼ 276.88	

B.	Full Name (Last, First, Middle Initial) Brian Thomas	Date of Receipt MM / DD / YYYY 10 / 19 / 2009
	Mailing Address 5925 Boulder Bluff	Transaction ID: 00113.C94000
	City State Zip Code Cumming GA 30040	Amount of Each Receipt this Period 21.24
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (21.24- /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 ▼ 298.12	

C.	Full Name (Last, First, Middle Initial) Brian Thomas	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 5925 Boulder Bluff	Transaction ID: 00113.C94343
	City State Zip Code Cumming GA 30040	Amount of Each Receipt this Period 10.48
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (10.48- /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 ▼ 308.60	

SUBTOTAL of Receipts This Page (optional)	▶	48.38
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 53 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Brian Thomas

Mailing Address 5925 Boulder Bluff

City State Zip Code
Cumming GA 30040

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 ▼ 333.69

Date of Receipt MM / DD / YYYY
12 / 30 / 2009

Transaction ID: 00113.C94686

Amount of Each Receipt this Period 25.09

Receipt

Payroll Deduction: (25.09- /Bi-Weekly)

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

Mailing Address 2527 Plantation Springs Springs

City State Zip Code
Richmond TX 77406

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 MM / DD / YYYY
07 / 01 / 2009

Transaction ID: 00113.C93089

Amount of Each Receipt this Period 140.00

Receipt

Payroll Deduction: (10.00- /Bi-Weekly)

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

Mailing Address 11107 Sheldon Bend Rd Lane

City State Zip Code
Richmond TX 77406

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt MM / DD / YYYY
07 / 01 / 2009

Transaction ID: 00113.C93092

Amount of Each Receipt this Period 140.00

Receipt

Payroll Deduction: (10.00- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 305.09

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 / 69

(check only one)

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

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

A.

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

Mailing Address 1967 Woodlands Place

City State Zip Code
Powell OH 43065

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5192.10

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: 00113.C93130

Amount of Each Receipt this Period

2692.20

Receipt

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

B.

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

Mailing Address 44 Lake Mist Drive

City State Zip Code
Sugar Land TX 77479

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: 00113.C93143

Amount of Each Receipt this Period

280.00

Receipt

Payroll Deduction: (20.00-/Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Philip Wollar

Mailing Address 412 Albany Lane

City State Zip Code
Vernon Hills IL 60061-1705

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

Name of Employer Cardinal Health, Inc Occupation Cnslt, App Support

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: 00113.C93086

Amount of Each Receipt this Period

140.00

Receipt

Payroll Deduction: (10.00-/Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

3112.20

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 55 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 6151 Haddo Way

City State Zip Code
Dublin OH 43017

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: 07 / 01 / 2009
Transaction ID: 00113.C93148
Amount of Each Receipt this Period: 280.00
Receipt
Payroll Deduction: (20.00- /Bi-Weekly)

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

Mailing Address 9761 Erin Woods Dr

City State Zip Code
Dublin OH 43017

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1654.93

Date of Receipt: 07 / 01 / 2009
Transaction ID: 00113.C93223
Amount of Each Receipt this Period: 391.40
Receipt
Payroll Deduction: (97.85- /Bi-Weekly)

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

Mailing Address 9761 Erin Woods Dr

City State Zip Code
Dublin OH 43017

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

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

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3004.93

Date of Receipt: 08 / 28 / 2009
Transaction ID: 00113.C93417
Amount of Each Receipt this Period: 1350.00
Receipt
Payroll Deduction: (135.00- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 2021.40

TOTAL This Period (last page this line number only) ► 60936.68

**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 / 69
	<input 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 checked="" type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Comerica Bank		Date of Receipt
	Mailing Address P.O. Box 75000 MC 2250		<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Detroit	MI	48275-2250
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: 90708.C92768
		Bank	
Receipt For:		Aggregate Year-to-Date	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="352.11"/>	<input type="text" value="20.53"/>
			Interest Received

B.	Full Name (Last, First, Middle Initial) Comerica Bank		Date of Receipt
	Mailing Address P.O. Box 75000 MC 2250		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Detroit	MI	48275-2250
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: 00113.C93224
		Bank	
Receipt For:		Aggregate Year-to-Date	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="372.80"/>	<input type="text" value="20.69"/>
			Interest Received

C.	Full Name (Last, First, Middle Initial) Comerica Bank		Date of Receipt
	Mailing Address P.O. Box 75000 MC 2250		<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Detroit	MI	48275-2250
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: 00113.C93516
		Bank	
Receipt For:		Aggregate Year-to-Date	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="385.56"/>	<input type="text" value="12.76"/>
			Interest Received

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="53.98"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 57 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Comerica Bank

Mailing Address P.O. Box 75000
MC 2250

City State Zip Code
Detroit MI 48275-2250

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

Name of Employer Occupation
Bank

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
394.94

Date of Receipt
MM / DD / YYYY
10 / 01 / 2009

Transaction ID: 00113.C93924

Amount of Each Receipt this Period
9.38

Interest Received

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

Mailing Address P.O. Box 75000
MC 2250

City State Zip Code
Detroit MI 48275-2250

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

Name of Employer Occupation
Bank

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
404.20

Date of Receipt
MM / DD / YYYY
11 / 01 / 2009

Transaction ID: 00113.C94189

Amount of Each Receipt this Period
9.26

Interest Received

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

Mailing Address P.O. Box 75000
MC 2250

City State Zip Code
Detroit MI 48275-2250

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

Name of Employer Occupation
Bank

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
414.34

Date of Receipt
MM / DD / YYYY
12 / 01 / 2009

Transaction ID: 00113.C94455

Amount of Each Receipt this Period
10.14

Interest Received

SUBTOTAL of Receipts This Page (optional) ► **28.78**

TOTAL This Period (last page this line number only) ► **82.76**

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 58 / 69

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

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

<p>A. Full Name (Last, First, Middle Initial) FREEDOM PROJECT; THE</p> <p>Mailing Address 631-B Pennsylvania Avenue SE</p> <p>City Washington State DC Zip Code 20003-4303</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name FREEDOM PROJECT; THE</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: ANNUAL/OTHER</p>	<p>Transaction ID: 00113.E1255 Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>DIRECT CONTRIBUTION</p>
<p>B. Full Name (Last, First, Middle Initial) Andrews for Congress</p> <p>Mailing Address P.O. Box 295</p> <p>City Oaklyn State NJ Zip Code 08107-</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name ROBERT E ANDREWS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 01</p>	<p>Transaction ID: 00113.E1239 Date of Disbursement 09 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>DIRECT CONTRIBUTION</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Sherrod Brown</p> <p>Mailing Address 2280 Kresge Dr</p> <p>City Vermilion State OH Zip Code 44001-1260</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name SHERROD BROWN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 00</p>	<p>Transaction ID: 00113.E1246 Date of Disbursement 09 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>DIRECT CONTRIBUTION</p>

SUBTOTAL of Disbursements This Page (optional) ►

6000.00

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 A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Coburn for Senate 2010 <hr/> Mailing Address 217 Third Street SE <hr/> City Washington State DC Zip Code 20003-0977 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name THOMAS A COBURN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00113.E1250 Date of Disbursement 11 / 13 / 2009 <hr/> Amount of Each Disbursement this Period 2000.00 <hr/> DIRECT CONTRIBUTION
	Category/ Type
B. Full Name (Last, First, Middle Initial) Anna Eshoo for Congress <hr/> Mailing Address P.O. Box 636 <hr/> City Annandale State VA Zip Code 22003- Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name ANNA ESHOO Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 14 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90727.E1224 Date of Disbursement 07 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 2000.00 <hr/> DIRECT CONTRIBUTION
	Category/ Type
C. Full Name (Last, First, Middle Initial) Grassley Committee <hr/> Mailing Address 521 E Locust St Fl 2 <hr/> City Des Moines State IA Zip Code 50309-1943 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name CHARLES E GRASSLEY Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00113.E1259 Date of Disbursement 12 / 15 / 2009 <hr/> Amount of Each Disbursement this Period 2000.00 <hr/> DIRECT CONTRIBUTION
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
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 A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Grassley Committee <hr/> Mailing Address 521 E Locust St Fl 2 <hr/> City Des Moines State IA Zip Code 50309-1943 <hr/> Purpose of Disbursement STOP PAYMENT Candidate Name CHARLES E GRASSLEY <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00113.E1258 Date of Disbursement 12 / 15 / 2009
	Amount of Each Disbursement this Period -2000.00
	STOP PAYMENT
	Category/ Type
B. Full Name (Last, First, Middle Initial) Gene Green Congressional Committee <hr/> Mailing Address P.O. Box 16128 <hr/> City Houston State TX Zip Code 77222-6128 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name RAYMOND E. GREEN <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 29 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00113.E1254 Date of Disbursement 11 / 20 / 2009
	Amount of Each Disbursement this Period 2000.00
	DIRECT CONTRIBUTION
	Category/ Type
C. Full Name (Last, First, Middle Initial) Kay Hagan for US Senate <hr/> Mailing Address 426 C St NE <hr/> City Washington State DC Zip Code 20002-5839 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name KAY R HAGAN <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 00 Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00113.E1248 Date of Disbursement 09 / 25 / 2009
	Amount of Each Disbursement this Period 1000.00
	DIRECT CONTRIBUTION
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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 A/K/A CARDINAL HEALTH COMPANIES PAC

<p>A. Full Name (Last, First, Middle Initial) Matheson for Congress</p> <p>Mailing Address PO Box 636</p> <p>City Annandale State VA Zip Code 22003-0636</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name JAMES MATHESON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00113.E1238 Date of Disbursement 09 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>DIRECT CONTRIBUTION</p>
<p>B. Full Name (Last, First, Middle Initial) Rangel for Congress</p> <p>Mailing Address P.O. Box 5577 Manhattanville Station</p> <p>City New York State NY Zip Code 10027-</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name CHARLES B RANGEL</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00113.E1257 Date of Disbursement 12 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>DIRECT CONTRIBUTION</p>
<p>C. Full Name (Last, First, Middle Initial) Mike Ross for Congress</p> <p>Mailing Address P.O. Box 360</p> <p>City Prescott State AR Zip Code 71857-0360</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name MICHAEL AVERY ROSS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00113.E1225 Date of Disbursement 09 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>DIRECT CONTRIBUTION</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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 A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Zack Space for Congress Mailing Address PO Box 75214 City Washington State DC Zip Code 20013-0214 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name ZACHARY T SPACE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00113.E1240 Date of Disbursement 09 / 16 / 2009
	Amount of Each Disbursement this Period 2000.00 Category/Type DIRECT CONTRIBUTION
B. Full Name (Last, First, Middle Initial) Wyden for Senate Mailing Address 122 C Street, NE Suite 505 City Washington State DC Zip Code 20001- Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name RONALD LEE WYDEN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00113.E1256 Date of Disbursement 11 / 30 / 2009
	Amount of Each Disbursement this Period 2000.00 Category/Type DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

23000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Batchelder for Representative Committee Mailing Address 4086 Irvine Oval City Medina State OH Zip Code 44256-9069 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00113.E1233 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00

B. Full Name (Last, First, Middle Initial) Team Burke Mailing Address 275 W 4th St City Marysville State OH Zip Code 43040-1127 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00113.E1232 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00

C. Full Name (Last, First, Middle Initial) Citizens with Celeste Mailing Address 1632 West First Avenue City Columbus State OH Zip Code 43212- Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00113.E1228 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 650.00

SUBTOTAL of Disbursements This Page (optional) ▶	1900.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Coleman for Columbus	Transaction ID: 00113.E1252 Date of Disbursement 11 / 17 / 2009
	Mailing Address 550 E. Walnut Street	Amount of Each Disbursement this Period 1000.00
	City Columbus State OH Zip Code 43215-	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Cordray Committee	Transaction ID: 00113.E1253 Date of Disbursement 11 / 17 / 2009
	Mailing Address PO Box 1776	Amount of Each Disbursement this Period 1000.00
	City Columbus State OH Zip Code 43216-1776	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Friends of Matthew J. Dolan	Transaction ID: 00113.E1230 Date of Disbursement 09 / 08 / 2009
	Mailing Address 100 7th Ave. Box 12	Amount of Each Disbursement this Period 300.00
	City Chardon State OH Zip Code 44024-7804	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2300.00
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)

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

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

<p>A. Full Name (Last, First, Middle Initial) Friends of Faber</p> <p>Mailing Address 7706 State Route 703</p> <p>City Celina State OH Zip Code 45822-2923</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00113.E1236 Date of Disbursement 09 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Citizens for Garland</p> <p>Mailing Address 4983 Mead Way Dr</p> <p>City New Albany State OH Zip Code 43054-9697</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00113.E1227 Date of Disbursement 09 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 650.00</p>
<p>C. Full Name (Last, First, Middle Initial) Karen Gillmor for Ohio</p> <p>Mailing Address PO Box 278</p> <p>City Tiffin State OH Zip Code 44883-0278</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00113.E1237 Date of Disbursement 09 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 650.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1800.00

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

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

A.	Full Name (Last, First, Middle Initial) Friends of Jay Goyal Mailing Address 2584 Wahl Dr City Mansfield State OH Zip Code 44904-1544 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00113.E1229 Date of Disbursement 09 / 08 / 2009 Amount of Each Disbursement this Period 1250.00
B.	Full Name (Last, First, Middle Initial) Citizens for Cheryl Grossman Mailing Address 865 Macon Aly City Columbus State OH Zip Code 43206-2652 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00113.E1231 Date of Disbursement 09 / 08 / 2009 Amount of Each Disbursement this Period 650.00
C.	Full Name (Last, First, Middle Initial) Friends of Heard Mailing Address 87 S Hampton Rd City Columbus State OH Zip Code 43213-1606 Purpose of Disbursement STOP PAYMENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00113.E1244 Date of Disbursement 09 / 25 / 2009 Amount of Each Disbursement this Period -500.00

SUBTOTAL of Disbursements This Page (optional) ▶	1400.00
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) Friends of Heard	Transaction ID: 00113.E1247 Date of Disbursement
	Mailing Address 87 S Hampton Rd	<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City Columbus State OH Zip Code 43213-1606	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT CONTRIBUTION	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of Heard	Transaction ID: 00113.E1226 Date of Disbursement
	Mailing Address 87 S Hampton Rd	<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Columbus State OH Zip Code 43213-1606	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT CONTRIBUTION	<input type="text" value="1500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Committee to Elect Cliff Hite	Transaction ID: 00113.E1243 Date of Disbursement
	Mailing Address 2417 Westmoor Rd	<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City Findlay State OH Zip Code 45840-2847	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT CONTRIBUTION	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

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

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

A.	Full Name (Last, First, Middle Initial) Committee for Jim Hughes	Transaction ID: 00113.E1235 Date of Disbursement
	Mailing Address 14 E. Gay Street 2nd Floor	<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Columbus State OH Zip Code 43215-	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT CONTRIBUTION	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Committee for Jim Hughes	Transaction ID: 00113.E1249 Date of Disbursement
	Mailing Address 14 E. Gay Street 2nd Floor	<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Columbus State OH Zip Code 43215-	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT CONTRIBUTION	<input type="text" value="700.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends of Shannon Jones	Transaction ID: 00113.E1251 Date of Disbursement
	Mailing Address 800 Valley View Point	<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City Springboro State OH Zip Code 45066-	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT CONTRIBUTION	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2700.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

