

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 05 01 2006 through 05 31 2006

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 JAMES W. HOEBERLING

Signature of Treasurer Electronically Filed by JAMES W. HOEBERLING Date 06 07 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		282080.14
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	297188.46									
(c) Total Receipts (from Line 19)	18381.90	80490.22								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	315570.36	362570.36								
7. Total Disbursements (from Line 31)	27500.00	74500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	288070.36	288070.36								
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**

Write or Type Committee Name

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

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	13851.65	39374.45
(i) Itemized (use Schedule A)	3637.18	37226.22
(ii) Unitemized	17488.83	76600.67
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	17488.83	76600.67
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	893.07	3889.55
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))	18381.90	80490.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	18381.90	80490.22

DETAILED SUMMARY PAGE

of Disbursements

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	54500.00
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.....	4500.00	20000.00
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))..	27500.00	74500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	27500.00	74500.00

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)	17488.83	76600.67
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17488.83	76600.67
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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Full Name (Last, First, Middle Initial)
Brooke Alexy

Mailing Address 15401 Oak Pond Lane

City State Zip Code
Libertyville IL 60048

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

Name of Employer Cardinal Health, Inc Occupation Counsel, Asst General

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 744.37

Date of Receipt
05 / 12 / 2006

Transaction ID: 60607.C73937

Amount of Each Receipt this Period
135.34

Receipt

Payroll Deduction: (67.67- /Pay Period)

B. Full Name (Last, First, Middle Initial)
David Anderson

Mailing Address 7977 Wingate Place

City State Zip Code
Delaware OH 43015

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

Name of Employer Cardinal Health, Inc Occupation Evp, Sales/mktg - Alt Care

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
05 / 12 / 2006

Transaction ID: 60607.C73803

Amount of Each Receipt this Period
40.00

Receipt

Payroll Deduction: (20.00- /Pay Period)

C. Full Name (Last, First, Middle Initial)
Charles Armstrong

Mailing Address 3290 Santolina Dr

City State Zip Code
Las Vegas NV 89135

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

Name of Employer Cardinal Health, Inc Occupation Dir, Strategic Initiatives

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 229.68

Date of Receipt
05 / 12 / 2006

Transaction ID: 60607.C73823

Amount of Each Receipt this Period
41.76

Receipt

Payroll Deduction: (20.88- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ► 217.10

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Charles Artillio		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 14 Teal Drive		Transaction ID: 60607.C73804	
City State Zip Code Langhorne PA 19047	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Bus Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 705.76		
		Payroll Deduction: (20.00- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Cassandra Baker		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1672 Barrington Rd		Transaction ID: 60607.C73888	
City State Zip Code Upper Arlington OH 43221	Amount of Each Receipt this Period 88.46		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Dir, State Govt Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 486.53		
		Payroll Deduction: (44.23- /Pay Period)	

Full Name (Last, First, Middle Initial) C. James Barker		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 2761 Skelton Ln		Transaction ID: 60607.C73800	
City State Zip Code Blacklick OH 43004	Amount of Each Receipt this Period 40.18		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Dir, Consumer Health Product		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.99		
		Payroll Deduction: (20.09- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	168.64
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Gregory Baumli		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 14566 Somerset Cir		Transaction ID: 60607.C73832
City State Zip Code Green Oaks IL 60048	Amount of Each Receipt this Period 49.40	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Svp, Manufacturing	Payroll Deduction: (24.70- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.70	

Full Name (Last, First, Middle Initial) B. Laurel Beeler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1723 Eagle Trl		Transaction ID: 60607.C73834
City State Zip Code Oxford MI 48371	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Dir, Reg	Payroll Deduction: (25.00- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) C. David Bergstrom		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 15 Kerby Lane		Transaction ID: 60607.C73829
City State Zip Code Mendham NJ 07945-2901	Amount of Each Receipt this Period 49.02	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Svp, Gm	Payroll Deduction: (24.51- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 269.61	

SUBTOTAL of Receipts This Page (optional) ▶	148.42
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 49
	<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)
Robert Bergstrom

Mailing Address 7425 Vista Del Mar

City State Zip Code
La Jolla CA 92037

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

Name of Employer Cardinal Health, Inc Occupation Svp, Gm

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
05 / 12 / 2006

Transaction ID: 60607.C73836

Amount of Each Receipt this Period
50.00

Receipt

Payroll Deduction: (25.00- /Pay Period)

B. Full Name (Last, First, Middle Initial)
Porter Bertelson

Mailing Address 6895 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 Svp, Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 383.13

Date of Receipt
05 / 12 / 2006

Transaction ID: 60607.C73860

Amount of Each Receipt this Period
69.66

Receipt

Payroll Deduction: (34.83- /Pay Period)

C. Full Name (Last, First, Middle Initial)
Timothy Boes

Mailing Address 103 La Trobe Ct

City State Zip Code
Southlake TX 76092

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

Name of Employer Cardinal Health, Inc Occupation Svp, Medication Solutions

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 918.61

Date of Receipt
05 / 12 / 2006

Transaction ID: 60607.C73948

Amount of Each Receipt this Period
167.02

Receipt

Payroll Deduction: (83.51- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	286.68
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. William Bolding		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1116 Keats Court		Transaction ID: 60607.C73818	
City Lansdale	State PA	Zip Code 19446	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		
		Payroll Deduction: (20.00- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Scott Bostick		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1546 Vivaldi Drive		Transaction ID: 60607.C73885	
City Cardiff	State CA	Zip Code 92007	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 Vp, Gm-supply Chain Solution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00		
		Payroll Deduction: (40.00- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Anne Bouchenoire		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 5772 Banavie Ct		Transaction ID: 60607.C73864	
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 74.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Global Branding		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 407.00		
		Payroll Deduction: (37.00- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	194.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Full Name (Last, First, Middle Initial) Mark Branday		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 55 Island Blvd		Transaction ID: 60607.C73849	
City State Zip Code Fox Island WA 98333	Amount of Each Receipt this Period 58.96		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Vp, Corp Solutions		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 324.28		
		Payroll Deduction: (29.48- /Pay Period)	

B. Full Name (Last, First, Middle Initial) Thomas Burke		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 21 Parsons Drive		Transaction ID: 60607.C73775	
City State Zip Code Swampscott MA 01907	Amount of Each Receipt this Period 39.66		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Pres, Northeast Region		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.13		
		Payroll Deduction: (19.83- /Pay Period)	

C. Full Name (Last, First, Middle Initial) Gary Cacciatore		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 3810 Loch Glen Court		Transaction ID: 60607.C73847	
City State Zip Code Houston TX 77059	Amount of Each Receipt this Period 56.18		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Dir, Affairs - Counsel-regltry		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.99		
		Payroll Deduction: (28.09- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	154.80
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Thomas Calhoun		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 5n496 W Lakeview Cir		Transaction ID: 60607.C73845
City State Zip Code St Charles IL 60175	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 54.14
Name of Employer Cardinal Health, Inc	Occupation Svp, Pharma Dist Group	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.77	Payroll Deduction: (27.07- /Pay Period)

Full Name (Last, First, Middle Initial) B. David Canniff		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1674 Kindra Court		Transaction ID: 60607.C73801
City State Zip Code Brentwood TN 37027	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00
Name of Employer Cardinal Health, Inc	Occupation Vp, Gm	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	Payroll Deduction: (20.00- /Pay Period)

Full Name (Last, First, Middle Initial) C. Debra Caravelli		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 4862 Vista Ridge Dr		Transaction ID: 60607.C73820
City State Zip Code Dublin OH 43017	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.38
Name of Employer Cardinal Health, Inc	Occupation Svp, Hr Service Deliv/vend Mgm	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.97	Payroll Deduction: (20.19- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	134.52
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Nicole Cardosa		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 3248 Brant Street		Transaction ID: 60607.C73816
City San Diego	State CA	Zip Code 92103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Cardinal Health, Inc	Occupation Dir, Sales - Regional	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	Payroll Deduction: (20.00- /Pay Period)

Full Name (Last, First, Middle Initial) B. Mary Cooney		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 5151 Edloe # 13207		Transaction ID: 60607.C73923
City Houston	State TX	Zip Code 77005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 101.50
Name of Employer Cardinal Health, Inc	Occupation Svp, Hr Business Partner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 558.25	Payroll Deduction: (50.75- /Pay Period)

Full Name (Last, First, Middle Initial) C. Bonita Court		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1306 Downs Parkway		Transaction ID: 60607.C73825
City Libertyville	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 43.04
Name of Employer Cardinal Health, Inc	Occupation Sr Mgr, Sls & Mktg	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.32	Payroll Deduction: (21.52- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	204.54
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 49
	<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

Full Name (Last, First, Middle Initial) A. Jody Davids		Date of Receipt MM / DD / YYYY 05 / 12 / 2006
Mailing Address 7638 Red Bay Court		Transaction ID: 60607.C73921
City Dublin	State OH	Zip Code 43016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Cardinal Health, Inc	Occupation Evp, Cio	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	Payroll Deduction: (50.00- /Pay Period)

Full Name (Last, First, Middle Initial) B. Ted Dibiase		Date of Receipt MM / DD / YYYY 05 / 12 / 2006
Mailing Address 4949 Chaddington Dr		Transaction ID: 60607.C73926
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 118.04
Name of Employer Cardinal Health, Inc	Occupation Vp, Advice & Counsel Ctr	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 649.22	Payroll Deduction: (59.02- /Pay Period)

Full Name (Last, First, Middle Initial) C. Scott Dodson		Date of Receipt MM / DD / YYYY 05 / 12 / 2006
Mailing Address 7000 Grate Park Dr		Transaction ID: 60607.C73773
City New Albany	State OH	Zip Code 43054
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.50
Name of Employer Cardinal Health, Inc	Occupation Controller, Nlc	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.05	Payroll Deduction: (19.25- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	256.54
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 49
	<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) Gary Dolch		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 8382 Deep Run		Transaction ID: 60607.C73865
City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Evp, Quality	Payroll Deduction: (37.50- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 412.50	

B. Full Name (Last, First, Middle Initial) James Egan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 4650 Aberdeen Ave		Transaction ID: 60607.C73840
City State Zip Code Dublin OH 43016	Amount of Each Receipt this Period 51.36	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Svp, Enterprise It	Payroll Deduction: (25.68- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 282.48	

C. Full Name (Last, First, Middle Initial) Eric Ellingson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1308 Dancer Ct		Transaction ID: 60607.C73842
City State Zip Code Libertyville IL 60048	Amount of Each Receipt this Period 52.30	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Dir, R&d	Payroll Deduction: (26.15- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 287.65	

SUBTOTAL of Receipts This Page (optional) ▶	178.66
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Jo Anne Fasetti		Date of Receipt MM / DD / YYYY 05 / 12 / 2006
Mailing Address 1163 Vineyard Dr		Transaction ID: 60607.C73889
City Gurnee	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 89.56
Name of Employer Cardinal Health, Inc	Occupation Svp, Hr Business Partner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 492.58	Payroll Deduction: (44.78- /Pay Period)

Full Name (Last, First, Middle Initial) B. Eric Feltes		Date of Receipt MM / DD / YYYY 05 / 12 / 2006
Mailing Address 718 Woodridge Trail		Transaction ID: 60607.C73826
City Mchenry	State IL	Zip Code 60050
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 44.00
Name of Employer Cardinal Health, Inc	Occupation Mgr, Business Development	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.00	Payroll Deduction: (22.00- /Pay Period)

Full Name (Last, First, Middle Initial) C. Nathaniel Filler		Date of Receipt MM / DD / YYYY 05 / 12 / 2006
Mailing Address 777 Military Drive		Transaction ID: 60607.C73774
City Galloway	State OH	Zip Code 43119
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.24
Name of Employer Cardinal Health, Inc	Occupation Mgr, Gov't Relations - St	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.82	Payroll Deduction: (19.62- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	172.80
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Karen Flynn		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 205 Rising Hill Ln		Transaction ID: 60607.C73809	
City State Zip Code Chester Springs PA 19425	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Global Accounts		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		
		Payroll Deduction: (20.00- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Ivan Fong		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 3 Cherry Lane		Transaction ID: 60607.C73959	
City State Zip Code Westport CT 06880	Amount of Each Receipt this Period 4775.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation EVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Brendan Ford		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 798 Tweed Court		Transaction ID: 60607.C73714	
City State Zip Code Worthington OH 43085	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Evp, Corp Dev		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		
		Payroll Deduction: (100.0- 0/Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	5015.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Shawn Gallagher		Date of Receipt MM / DD / YYYY 05 / 12 / 2006
Mailing Address 9501 Bartons Creekrd		Transaction ID: 60607.C73815
City Raleigh	State NC	Zip Code 27615
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Cardinal Health, Inc	Occupation Vp/gm	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	Payroll Deduction: (20.00- /Pay Period)

Full Name (Last, First, Middle Initial) B. Robert Giacalone		Date of Receipt MM / DD / YYYY 05 / 12 / 2006
Mailing Address 7471 Balfoure Circle		Transaction ID: 60607.C73867
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.12
Name of Employer Cardinal Health, Inc	Occupation Svp, Reg Affairs/chf Reg Cnsl	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 424.16	Payroll Deduction: (38.56- /Pay Period)

Full Name (Last, First, Middle Initial) C. Robert Glover		Date of Receipt MM / DD / YYYY 05 / 12 / 2006
Mailing Address 5633 N Kostner Ave		Transaction ID: 60607.C73841
City Chicago	State IL	Zip Code 60646
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 52.26
Name of Employer Cardinal Health, Inc	Occupation Vp, Hlth Sys	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 287.43	Payroll Deduction: (26.13- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	169.38
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Debra Hadley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6		
Mailing Address 2698 Berwyn Road		Transaction ID: 60607.C73855		
City State Zip Code Columbus OH 43221	Amount of Each Receipt this Period 60.00		Receipt Payroll Deduction: (30.00- /Pay Period)	
FEC ID number of contributing federal political committee. C		Receipt		
Name of Employer Cardinal Health, Inc	Occupation Dir, Community Aff/ Contribute	Aggregate Year-to-Date ▼ 330.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

Full Name (Last, First, Middle Initial) B. L Glenn Hall		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6		
Mailing Address 12320 Alameda Trace Circle #1502		Transaction ID: 60607.C73848		
City State Zip Code Austin TX 78727	Amount of Each Receipt this Period 58.52		Receipt Payroll Deduction: (29.26- /Pay Period)	
FEC ID number of contributing federal political committee. C		Receipt		
Name of Employer Cardinal Health, Inc	Occupation Vp, Gm	Aggregate Year-to-Date ▼ 321.86		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

Full Name (Last, First, Middle Initial) C. Troy Hanson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6		
Mailing Address 5622 Dorsey Drive		Transaction ID: 60607.C73827		
City State Zip Code Columbus OH 43235	Amount of Each Receipt this Period 44.44		Receipt Payroll Deduction: (22.22- /Pay Period)	
FEC ID number of contributing federal political committee. C		Receipt		
Name of Employer Cardinal Health, Inc	Occupation Dir, Business Partner	Aggregate Year-to-Date ▼ 244.42		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional) ▶	162.96
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 49
	<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) Mark Hartman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 7677 Tartan Fields Dr		Transaction ID: 60607.C73951	
City State Zip Code Dublin OH 43017		Amount of Each Receipt this Period 177.40	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc		Occupation Evp, Corp Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 975.70	
		Payroll Deduction: (88.70- /Pay Period)	

B. Full Name (Last, First, Middle Initial) Linda Harty		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1761 Roxbury Rd		Transaction ID: 60607.C73716	
City State Zip Code Columbus OH 43212		Amount of Each Receipt this Period 206.90	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc		Occupation Svp, Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1137.95	
		Payroll Deduction: (103.4- 5/Pay Period)	

C. Full Name (Last, First, Middle Initial) Richard Heard		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 415 Misty Manor		Transaction ID: 60607.C73835	
City State Zip Code Houston TX 77094		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc		Occupation Vp, Corp Health Systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	
		Payroll Deduction: (25.00- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	434.30
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. James Hethcox		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 5442 Haverhill Drive		Transaction ID: 60607.C73858
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 65.38
Name of Employer Cardinal Health, Inc	Occupation Vp, Ctr Med Safe/clin Imprv	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 359.59	Payroll Deduction: (32.69- /Pay Period)

Full Name (Last, First, Middle Initial) B. Robin Hoke		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 2134 Yorkshire Road		Transaction ID: 60607.C73868
City Columbus	State OH	Zip Code 43221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 79.12
Name of Employer Cardinal Health, Inc	Occupation Svp, Strategic Initiatives	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 433.40	Payroll Deduction: (39.56- /Pay Period)

Full Name (Last, First, Middle Initial) C. Stephen Inacker		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1490 S Ridge Rd		Transaction ID: 60607.C73838
City Lake Forest	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.36
Name of Employer Cardinal Health, Inc	Occupation Pres, Hosp Supply Dist	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.98	Payroll Deduction: (25.18- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	194.86
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 / 49
<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

Full Name (Last, First, Middle Initial) A. Renard Jackson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 744 Tennis Ave		Transaction ID: 60607.C73799	
City Ambler	State PA	Zip Code 19002	Amount of Each Receipt this Period 40.18
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Evp, Packaging - Contract		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.99		
		Payroll Deduction: (20.09- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Stephen Johnson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 360 Ormond St Se		Transaction ID: 60607.C73843	
City Atlanta	State GA	Zip Code 30315	Amount of Each Receipt this Period 52.52
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Distribution Srvc		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.86		
		Payroll Deduction: (26.26- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Remi Kajogbola		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 15751 Sheridan St #149		Transaction ID: 60607.C73892	
City Fort Lauderdale	State FL	Zip Code 33331	Amount of Each Receipt this Period 99.74
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Rvp, Corporate Solutions		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 548.57		
		Payroll Deduction: (49.87- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	192.44
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Michael Kennedy		Date of Receipt MM / DD / YYYY 05 / 12 / 2006
Mailing Address 4783 Vista Ridge Dr		Transaction ID: 60607.C73846
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 55.74	
Name of Employer Cardinal Health, Inc	Occupation Svp & General Counsel	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.57	Payroll Deduction: (27.87- /Pay Period)

Full Name (Last, First, Middle Initial) B. Lisa Kirsh		Date of Receipt MM / DD / YYYY 05 / 12 / 2006
Mailing Address 2508 Bayview Dr		Transaction ID: 60607.C73807
City Nashville	State TN	Zip Code 37217
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00	
Name of Employer Cardinal Health, Inc	Occupation Dir, Purchasing - Strategic	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	Payroll Deduction: (20.00- /Pay Period)

Full Name (Last, First, Middle Initial) C. Michael Kopp		Date of Receipt MM / DD / YYYY 05 / 12 / 2006
Mailing Address 4050 Whispering Pines Court		Transaction ID: 60607.C73839
City Suwanee	State GA	Zip Code 30024
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.76	
Name of Employer Cardinal Health, Inc	Occupation Vp, Business Development	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.18	Payroll Deduction: (25.38- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	146.50
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Joseph Kubicek		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 443 Douglas		Transaction ID: 60607.C73830	
City Lake Forest	State IL	Amount of Each Receipt this Period 49.18	
Zip Code 60045		Receipt	
FEC ID number of contributing federal political committee. C		Payroll Deduction: (24.59- /Pay Period)	
Name of Employer Cardinal Health, Inc	Occupation Svp, Finance	Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 267.71	Receipt	

Full Name (Last, First, Middle Initial) B. Ronald Labrum		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1325 Canterbury Cir		Transaction ID: 60607.C73726	
City Libertyville	State IL	Amount of Each Receipt this Period 232.00	
Zip Code 60048		Receipt	
FEC ID number of contributing federal political committee. C		Payroll Deduction: (116.0- 0/Pay Period)	
Name of Employer Cardinal Health, Inc	Occupation Chmn/ceo, Supply Chain Srvcs	Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1276.00	Receipt	

Full Name (Last, First, Middle Initial) C. Frank Lafasto		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1451 S Kurtis Lane		Transaction ID: 60607.C73733	
City Lake Forest	State IL	Amount of Each Receipt this Period 246.08	
Zip Code 60045		Receipt	
FEC ID number of contributing federal political committee. C		Payroll Deduction: (123.0- 4/Pay Period)	
Name of Employer Cardinal Health, Inc	Occupation Svp, Org Effectiveness	Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1353.44	Receipt	

SUBTOTAL of Receipts This Page (optional) ▶	527.26
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Clay Lassiter		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 2023 Cannonbury Lane		Transaction ID: 60607.C73828	
City State Zip Code Richmond TX 77469	Amount of Each Receipt this Period 48.24		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.09		
		Payroll Deduction: (24.12- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Steve Lawrence		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 4868 Carrigan Ridge		Transaction ID: 60607.C73891	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 99.66		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Retail Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 548.13		
		Payroll Deduction: (49.83- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Michael Lynch		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 550 E Rosemary		Transaction ID: 60607.C73749	
City State Zip Code Lake Forest IL 60045	Amount of Each Receipt this Period 298.56		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Group Pres, Mfg		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1642.08		
		Payroll Deduction: (149.2- 8/Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	446.46
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Donna Mann		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 6666 Mcvey Blvd		Transaction ID: 60607.C73824	
City State Zip Code West Worthington OH 43235	Amount of Each Receipt this Period 42.30		Receipt Payroll Deduction: (21.15- /Pay Period)
FEC ID number of contributing federal political committee. C			
Name of Employer Cardinal Health, Inc	Occupation Dir, Hr Svc Delivery/transform		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.68		

Full Name (Last, First, Middle Initial) B. Samuel Manzanares		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1205 Brown Ridge		Transaction ID: 60607.C73925	
City State Zip Code El Paso TX 79912	Amount of Each Receipt this Period 107.70		Receipt Payroll Deduction: (53.85- /Pay Period)
FEC ID number of contributing federal political committee. C			
Name of Employer Cardinal Health, Inc	Occupation Vp, Qlty Ops		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 556.15		

Full Name (Last, First, Middle Initial) C. Robin Martial		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1741 Haggin Grove W		Transaction ID: 60607.C73817	
City State Zip Code Carmichael CA 95608	Amount of Each Receipt this Period 40.00		Receipt Payroll Deduction: (20.00- /Pay Period)
FEC ID number of contributing federal political committee. C			
Name of Employer Cardinal Health, Inc	Occupation Evp, Sales & Mktg- Hlth Sy		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

SUBTOTAL of Receipts This Page (optional) ▶	190.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<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

Full Name (Last, First, Middle Initial) A. Janice Mccampbell		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 8001 Millenium Drive		Transaction ID: 60607.C74084
City Raleigh	State NC	Zip Code 27614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.58
Name of Employer Cardinal Health, Inc	Occupation Dir, Engineering - Disposables	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.38	Payroll Deduction: (16.58- /Pay Period)

Full Name (Last, First, Middle Initial) B. Janice Mccampbell		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 8001 Millenium Drive		Transaction ID: 60607.C73833
City Raleigh	State NC	Zip Code 27614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.87
Name of Employer Cardinal Health, Inc	Occupation Dir, Engineering - Disposables	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.25	Payroll Deduction: (24.87- /Pay Period)

Full Name (Last, First, Middle Initial) C. Lindy Mclean		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 7272 Black Abbey Ct		Transaction ID: 60607.C73857
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 61.28
Name of Employer Cardinal Health, Inc	Occupation Mgr, Key Account	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.04	Payroll Deduction: (30.64- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	102.73
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 49
	<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

Full Name (Last, First, Middle Initial) A. Bruce Mcwhinney		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 5843 Rushwood Drive		Transaction ID: 60607.C73806	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Center Med Safe/clin Imprv		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		
		Payroll Deduction: (20.00- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Jose Mejorado		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 7656 Dianjou Dr.		Transaction ID: 60607.C73850	
City State Zip Code El Paso TX 79912	Amount of Each Receipt this Period 59.52		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Mfg Convertors		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 327.36		
		Payroll Deduction: (29.76- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Mark Mitchell		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 6604 Cresent Lake Dr		Transaction ID: 60607.C73859	
City State Zip Code Lakeland FL 33813	Amount of Each Receipt this Period 65.48		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Health Systems - Group		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.14		
		Payroll Deduction: (32.74- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	165.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Full Name (Last, First, Middle Initial) Robert Myers		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address Po Box 230 Cardinal (mps) Expat		Transaction ID: 60607.C73957
City Waukegan State IL Zip Code 60079	Amount of Each Receipt this Period 193.64	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Gmd & Ceo, Singapore	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1065.02	
		Payroll Deduction: (96.82- /Pay Period)

B. Full Name (Last, First, Middle Initial) Frederick Nelson		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 7303 Deacon Court		Transaction ID: 60607.C73862
City Dublin State OH Zip Code 43017	Amount of Each Receipt this Period 72.02	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Integrated Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 396.11	
		Payroll Deduction: (36.01- /Pay Period)

C. Full Name (Last, First, Middle Initial) Michael Orscheln		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 601 Buckingham Pl		Transaction ID: 60607.C73814
City Libertyville State IL Zip Code 60048	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp/gm, Ambulatory Care	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
		Payroll Deduction: (20.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ▶	305.66
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. William Owad		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 7558 Heatherwood Ln		Transaction ID: 60607.C73941	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 155.76		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Svp, Operational Excellence		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 856.68		
		Payroll Deduction: (77.88- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Joseph Papa		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address One Deerhill Rd		Transaction ID: 60607.C73717	
City State Zip Code Chester NJ 07930	Amount of Each Receipt this Period 215.46		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Chairman/ceo, Pts		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1185.03		
		Payroll Deduction: (107.7- 3/Pay Period)	

Full Name (Last, First, Middle Initial) C. Thomas Perrine		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 7249 Landon Lane		Transaction ID: 60607.C73811	
City State Zip Code New Albany OH 43054	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Svp, Enterprise It		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		
		Payroll Deduction: (20.00- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	411.22
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Full Name (Last, First, Middle Initial) Kevin Peters		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 465 Fourth Fairway Drive		Transaction ID: 60607.C73890	
City State Zip Code Roswell GA 30076		Amount of Each Receipt this Period 95.64	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc		Occupation Svp, Corp Health Systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 526.02	
		Payroll Deduction: (47.82- /Pay Period)	

B. Full Name (Last, First, Middle Initial) George Plava		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 3526 Pembroke Dr		Transaction ID: 60607.C73936	
City State Zip Code Richmond TX 77469		Amount of Each Receipt this Period 131.60	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc		Occupation Pres, Pharmacy Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 723.80	
		Payroll Deduction: (65.80- /Pay Period)	

C. Full Name (Last, First, Middle Initial) Kathy Popejoy		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 11127 W 59th Ave		Transaction ID: 60607.C73798	
City State Zip Code Arvada CO 80004		Amount of Each Receipt this Period 40.14	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc		Occupation Mgr, Region Ops B	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.77	
		Payroll Deduction: (20.07- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	267.38
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. William Rampy		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 103 Foxglove Ln		Transaction ID: 60607.C73922
City Bentonville	State AR	Zip Code 72712
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.96
Name of Employer Cardinal Health, Inc	Occupation Svp, Franchise Operations	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 353.36	Payroll Deduction: (50.48- /Pay Period)

Full Name (Last, First, Middle Initial) B. Stephen Reardon		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 5078 Breckenhurst Dr		Transaction ID: 60607.C73802
City Hilliard	State OH	Zip Code 43026
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Cardinal Health, Inc	Occupation Vp, Quality	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	Payroll Deduction: (20.00- /Pay Period)

Full Name (Last, First, Middle Initial) C. Cynthia Rhomberg		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 9379 Redan Court		Transaction ID: 60607.C73810
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Cardinal Health, Inc	Occupation Vp, Corp Marketing	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	Payroll Deduction: (20.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	180.96
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 49
	<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

Full Name (Last, First, Middle Initial) A. Sandra Rigopoulos		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 307 S Hi Lusi Ave		Transaction ID: 60607.C73947
City State Zip Code Mt Prospect IL 60056	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 166.20
Name of Employer Cardinal Health, Inc	Occupation Vp, Vendor Mgmt & Admin	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 914.10	Payroll Deduction: (83.10- /Pay Period)

Full Name (Last, First, Middle Initial) B. Mark Rosenbaum		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 6565 Lockhart Lane		Transaction ID: 60607.C73748
City State Zip Code Dublin OH 43017	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 286.62
Name of Employer Cardinal Health, Inc	Occupation Pres, Ips Sales	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1576.41	Payroll Deduction: (143.3- 1/Pay Period)

Full Name (Last, First, Middle Initial) C. Claudia Russell		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 5064 Seagrove Cove		Transaction ID: 60607.C74204
City State Zip Code San Diego CA 92130	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.87
Name of Employer Cardinal Health, Inc	Occupation Vp, Mktg - Strategic	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 408.70	Payroll Deduction: (40.87- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	493.69
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Full Name (Last, First, Middle Initial)
Claudia Russell

Mailing Address 5064 Seagrove Cove

City San Diego State CA Zip Code 92130

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

Name of Employer Cardinal Health, Inc Occupation Vp, Mktg - Strategic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 429.13

Date of Receipt
05 / 26 / 2006

Transaction ID: 60607.C73821

Amount of Each Receipt this Period
20.43

Receipt

Payroll Deduction: (20.43- /Pay Period)

B. Full Name (Last, First, Middle Initial)
James Saponaro

Mailing Address 9392 Redan Court

City Dublin State OH Zip Code 43017

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

Name of Employer Cardinal Health, Inc Occupation Svp, Business Units- Retail

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 952.38

Date of Receipt
05 / 12 / 2006

Transaction ID: 60607.C73950

Amount of Each Receipt this Period
173.16

Receipt

Payroll Deduction: (86.58- /Pay Period)

C. Full Name (Last, First, Middle Initial)
Richard Schindewolf

Mailing Address 6507 Burning Tree

City Mchenry State IL Zip Code 60050

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

Name of Employer Cardinal Health, Inc Occupation Vp, Gm

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
05 / 12 / 2006

Transaction ID: 60607.C73856

Amount of Each Receipt this Period
60.00

Receipt

Payroll Deduction: (30.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ▶ **253.59**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 49
	<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

Full Name (Last, First, Middle Initial) A. David Schlotterbeck		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6		
Mailing Address 12 Hermitage Lane		Transaction ID: 60607.C73715		
City State Zip Code Laguna Niguel CA 92677	Amount of Each Receipt this Period 200.00		Receipt Payroll Deduction: (100.0-0/Pay Period)	
FEC ID number of contributing federal political committee. C		Receipt		
Name of Employer Cardinal Health, Inc	Occupation Pres/ceo	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 1100.00				

Full Name (Last, First, Middle Initial) B. Michael Scrase		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6		
Mailing Address 8358 Davington		Transaction ID: 60607.C73844		
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 53.04		Receipt Payroll Deduction: (26.52-/Pay Period)	
FEC ID number of contributing federal political committee. C		Receipt		
Name of Employer Cardinal Health, Inc	Occupation Dir, Vendor Management	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 291.72				

Full Name (Last, First, Middle Initial) C. Frank Segrave		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6		
Mailing Address 5371 Gordon Way		Transaction ID: 60607.C73813		
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 40.00		Receipt Payroll Deduction: (20.00-/Pay Period)	
FEC ID number of contributing federal political committee. C		Receipt		
Name of Employer Cardinal Health, Inc	Occupation Svp, Purchasing	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 220.00				

SUBTOTAL of Receipts This Page (optional) ▶	293.04
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Kendell Sherrer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 7720 Heatherwood Ln		Transaction ID: 60607.C73819	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 40.22		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Hr Transformation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.21		
		Payroll Deduction: (20.11- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Jesse Sims		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 11014 Black Falls Ct		Transaction ID: 60607.C73920	
City State Zip Code Sugar Land TX 77478	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Mgr, Service - Technical		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		
		Payroll Deduction: (50.00- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Jake St. Philip		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 4727 Plummer Court		Transaction ID: 60607.C73812	
City State Zip Code San Diego CA 92130	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Pres, Alaris Products		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		
		Payroll Deduction: (20.00- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	180.22
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Full Name (Last, First, Middle Initial) Cornell Stamoran Mailing Address 3 Matrick Court City Hillsborough State NJ Zip Code 08844 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6 Transaction ID: 60607.C73935 Amount of Each Receipt this Period 129.24 Receipt Payroll Deduction: (64.62- /Pay Period)
Name of Employer Cardinal Health, Inc Occupation Vp, Strategy & Bus Process Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 710.82		

B. Full Name (Last, First, Middle Initial) Mark Stauffer Mailing Address 10644 Dundee Ct City Powell State OH Zip Code 43065 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6 Transaction ID: 60607.C73924 Amount of Each Receipt this Period 102.72 Receipt Payroll Deduction: (51.36- /Pay Period)
Name of Employer Cardinal Health, Inc Occupation Svp, Audit Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 564.96		

C. Full Name (Last, First, Middle Initial) Meriann Stockwell Mailing Address 105 16th Street City Belleair Beach State FL Zip Code 33786 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6 Transaction ID: 60607.C73772 Amount of Each Receipt this Period 38.36 Receipt Payroll Deduction: (19.18- /Pay Period)
Name of Employer Cardinal Health, Inc Occupation Dir, Gbl Strat Procurement Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.98		

SUBTOTAL of Receipts This Page (optional)	270.32
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Greg Storm		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 7703 E 85th St		Transaction ID: 60607.C73730	
City State Zip Code Tulsa OK 74133	Amount of Each Receipt this Period 25.38		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Mgr, Proc Supply Chain Solutns		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.18		
		Payroll Deduction: (12.69- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Greg Storm		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 7703 E 85th St		Transaction ID: 60607.C73953	
City State Zip Code Tulsa OK 74133	Amount of Each Receipt this Period 9.35		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Mgr, Proc Supply Chain Solutns		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.53		
		Payroll Deduction: (9.35- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Greg Storm		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 7703 E 85th St		Transaction ID: 60607.C73745	
City State Zip Code Tulsa OK 74133	Amount of Each Receipt this Period 14.59		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Mgr, Proc Supply Chain Solutns		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.12		
		Payroll Deduction: (14.59- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	49.32
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Joseph Strack		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 29420 Cambridge Ct		Transaction ID: 60607.C73863	
City State Zip Code Agoura Hills CA 91301	Amount of Each Receipt this Period 74.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Rvp, Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 407.00		
		Payroll Deduction: (37.00- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Thomas Stuart		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 2 Jonah Ct Po Box 615		Transaction ID: 60607.C73861	
City State Zip Code Peapack NJ 07977	Amount of Each Receipt this Period 70.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Pres, Oral Technologies		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00		
		Payroll Deduction: (35.00- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Robert Summers		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 146 Chasely Circle		Transaction ID: 60607.C73831	
City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 49.24		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Sales - Healthsystems		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.82		
		Payroll Deduction: (24.62- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	193.24
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Full Name (Last, First, Middle Initial) Mary Jane Tew Mailing Address 6315 Duffy Rd City State Zip Code Delaware OH 43015 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6 Transaction ID: 60607.C73837 Amount of Each Receipt this Period 50.00 Receipt Payroll Deduction: (25.00- /Pay Period)
Name of Employer Cardinal Health, Inc Occupation Vp, Sales - Admin Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00		

B. Full Name (Last, First, Middle Initial) Richard Walsh Mailing Address 8722 Sweetwater Ct City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6 Transaction ID: 60607.C73866 Amount of Each Receipt this Period 76.12 Receipt Payroll Deduction: (38.06- /Pay Period)
Name of Employer Cardinal Health, Inc Occupation Vp, Flight Ops/bus Cont Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 418.66		

C. Full Name (Last, First, Middle Initial) Robert Walter Mailing Address C/o Cardinal Health 7000 Cardinal Place City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6 Transaction ID: 60607.C73776 Amount of Each Receipt this Period 384.04 Receipt Payroll Deduction: (192.0- 2/Pay Period)
Name of Employer Cardinal Health, Inc Occupation Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2112.22		

SUBTOTAL of Receipts This Page (optional)	510.16
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 49
	<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

Full Name (Last, First, Middle Initial) A. Carole Watkins		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1967 Woodlands Place		Transaction ID: 60607.C73886	
City State Zip Code Powell OH 43065	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 Evp, Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00		
		Payroll Deduction: (40.00- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Curt Witte		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 6724 Perimeter Loop Rd #232		Transaction ID: 60607.C73949	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 171.28		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Mktg - Alt Care		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 942.04		
		Payroll Deduction: (85.64- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Deborah Wolin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 44 Lake Mist Drive		Transaction ID: 60607.C73805	
City State Zip Code Sugar Land TX 77479	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Counsel, Sr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		
		Payroll Deduction: (20.00- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	291.28
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 / 49
	(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

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)
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 & Gov't Rel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1357.51

Date of Receipt
MM / DD / YYYY
05 / 12 / 2006

Transaction ID: 60607.C73734

Amount of Each Receipt this Period
246.82

Receipt

Payroll Deduction: (123.4-1/Pay Period)

B. Full Name (Last, First, Middle Initial)
James Worley

Mailing Address 9 Whitewood Circle

City State Zip Code
Amesbury MA 01913

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

Name of Employer Cardinal Health, Inc Occupation Rvp, Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.38

Date of Receipt
MM / DD / YYYY
05 / 12 / 2006

Transaction ID: 60607.C73822

Amount of Each Receipt this Period
41.16

Receipt

Payroll Deduction: (20.58-/Pay Period)

SUBTOTAL of Receipts This Page (optional)	287.98
TOTAL This Period (last page this line number only)	13851.65

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 43 / 49	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" 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)
Comerica Bank

Mailing Address Po 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 ▼
3889.55

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 1 / 2 0 0 6

Transaction ID: 60607.C73640

Amount of Each Receipt this Period
893.07

Interest Received

SUBTOTAL of Receipts This Page (optional)	▶	893.07
TOTAL This Period (last page this line number only)	▶	893.07

**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 44 / 49

<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

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

Full Name (Last, First, Middle Initial) A. Andrews for Congress		Transaction ID: 60503.E726 Date of Disbursement
Mailing Address 215 Fourth Avenue Suite 200		<input type="text" value="05"/> <input type="text" value="01"/> / <input type="text" value="2006"/>
City Haddon Heights	State NJ	Zip Code 08035-
Purpose of Disbursement DIRECT CONTRIBUTION	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name ROBERT E ANDREWS	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DIRECT CONTRIBUTION
State: NJ	District: 01	

Full Name (Last, First, Middle Initial) B. Congressman Joe Barton Committee		Transaction ID: 60607.E730 Date of Disbursement
Mailing Address 2106 W. Ennis Avenue		<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="2006"/>
City Ennis	State TX	Zip Code 75119-
Purpose of Disbursement DIRECT CONTRIBUTION	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
Candidate Name JOE L BARTON	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DIRECT CONTRIBUTION
State: TX	District: 06	

Full Name (Last, First, Middle Initial) C. Congressman Joe Barton Committee		Transaction ID: 60607.E731 Date of Disbursement
Mailing Address 2106 W. Ennis Avenue		<input type="text" value="05"/> <input type="text" value="10"/> / <input type="text" value="2006"/>
City Ennis	State TX	Zip Code 75119-
Purpose of Disbursement DIRECT CONTRIBUTION	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
Candidate Name JOE L BARTON	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DIRECT CONTRIBUTION
State: TX	District: 06	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5000.00"/>
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)

PAGE 45 / 49

<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

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

Full Name (Last, First, Middle Initial) A. Friends of John Boehner		Transaction ID: 60607.E741 Date of Disbursement 05 / 31 / 2006	
Mailing Address 7908 Cincinnati-Dayton Road		Amount of Each Disbursement this Period 5000.00	
City West Chester State OH Zip Code 45069-	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type	
Candidate Name JOHN A BOEHNER	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08	DIRECT CONTRIBUTION		

Full Name (Last, First, Middle Initial) B. Hulshof for Congress		Transaction ID: 60503.E727 Date of Disbursement 05 / 01 / 2006	
Mailing Address 616 E Street, NW #802		Amount of Each Disbursement this Period 1000.00	
City Washington State DC Zip Code 20004-	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type	
Candidate Name KENNY CHARLES HULSHOF	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 09	DIRECT CONTRIBUTION		

Full Name (Last, First, Middle Initial) C. Ron Lewis for Congress		Transaction ID: 60607.E739 Date of Disbursement 05 / 11 / 2006	
Mailing Address 1690 Ring Road Suite 250		Amount of Each Disbursement this Period 1000.00	
City Elizabethtown State KY Zip Code 42701-	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type	
Candidate Name RON LEWIS	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02	DIRECT CONTRIBUTION		

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 46 / 49

<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

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

Full Name (Last, First, Middle Initial) A. Menendez for Senate		Transaction ID: 60607.E740 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1001 G Street, NW Suite 400E		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20001-	Category/ Type DIRECT CONTRIBUTION	
Purpose of Disbursement DIRECT CONTRIBUTION		
Candidate Name ROBERT MENENDEZ		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 00		

Full Name (Last, First, Middle Initial) B. Sue Myrick for Congress		Transaction ID: 60607.E732 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 6525 Morrison Blvd. Suite 103		Amount of Each Disbursement this Period 1000.00
City Charlotte State NC Zip Code 28211-	Category/ Type DIRECT CONTRIBUTION	
Purpose of Disbursement DIRECT CONTRIBUTION		
Candidate Name SUE MYRICK		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC District: 09		

Full Name (Last, First, Middle Initial) C. Regula for Congress Committee		Transaction ID: 60607.E729 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address P.O. Box 29576		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20017-	Category/ Type DIRECT CONTRIBUTION	
Purpose of Disbursement DIRECT CONTRIBUTION		
Candidate Name RALPH S REGULA		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 16		

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
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)

<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

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

Full Name (Last, First, Middle Initial) A. John Spratt for Congress		Transaction ID: 60503.E725 Date of Disbursement 05 / 01 / 2006	
Mailing Address P.O. Box 626		Amount of Each Disbursement this Period 2000.00	
City Annandale State VA Zip Code 22003-	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type	
Candidate Name JOHN M JR SPRATT		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05	DIRECT CONTRIBUTION		

Full Name (Last, First, Middle Initial) B. Tiberi for Congress		Transaction ID: 60503.E728 Date of Disbursement 05 / 01 / 2006	
Mailing Address 2021 E. Dublin - Granville Road Suite 2000		Amount of Each Disbursement this Period 2000.00	
City Columbus State OH Zip Code 43229-	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type	
Candidate Name PATRICK J TIBERI		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12	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)

PAGE 48 / 49

<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

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

Full Name (Last, First, Middle Initial) A. Committee for Larry Flowers		Transaction ID: 60607.E737 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 14 E. Gay Street		Amount of Each Disbursement this Period 1500.00
City Columbus State OH Zip Code 43215-	Purpose of Disbursement DIRECT CONTRIBUTION	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Citizens for Hottinger		Transaction ID: 60607.E733 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 386 Sabrecutt Drive		Amount of Each Disbursement this Period 500.00
City Newark State OH Zip Code 43055-	Purpose of Disbursement DIRECT CONTRIBUTION	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Committee for Jim Hughes		Transaction ID: 60607.E735 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 14 E. Gay Street		Amount of Each Disbursement this Period 500.00
City Columbus State OH Zip Code 48215-	Purpose of Disbursement DIRECT CONTRIBUTION	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
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)

PAGE 49 / 49

<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

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. Jacobson for State Senate Full Name (Last, First, Middle Initial) Mailing Address 211 S. Main Street Suite 610 City Dayton State OH Zip Code 45402-		Transaction ID: 60607.E738 Date of Disbursement 05 / 11 / 2006
Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name		Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Committee to Elect Niehaus Full Name (Last, First, Middle Initial) Mailing Address 1131 Little Indian Creek Road City New Richmond State OH Zip Code 45157-9602		Transaction ID: 60607.E736 Date of Disbursement 05 / 11 / 2006
Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name		Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Citizens for Geoffrey C. Smith Full Name (Last, First, Middle Initial) Mailing Address 865 Macon Alley City Columbus State OH Zip Code 43206-		Transaction ID: 60607.E734 Date of Disbursement 05 / 11 / 2006
Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name		Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2000.00
TOTAL This Period (last page this line number only) ▶	4500.00