

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 08 01 2006 through 08 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 09 12 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**

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

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	8

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	269024.79									
(c) Total Receipts (from Line 19)	13588.49	121733.14								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	282613.28	403813.28								
7. Total Disbursements (from Line 31)	27250.00	148450.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	255363.28	255363.28								
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	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	8

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	10228.34	69559.86
(i) Itemized (use Schedule A)	2283.13	45193.67
(ii) Unitemized	12511.47	114753.53
(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)	12511.47	114753.53
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.)	1077.02	6979.61
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))	13588.49	121733.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	13588.49	121733.14

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) 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	2700.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	2700.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	97500.00
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.....	17750.00	48250.00
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))..	27250.00	148450.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	27250.00	148450.00

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)	12511.47	114753.53
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12511.47	114753.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	2700.00
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	2700.00

**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 / 60
	<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 <u>Libertyville</u> <u>IL</u> <u>60048</u> FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60912.C75805 Amount of Each Receipt this Period <table border="1"> <tr> <td>135.34</td> </tr> </table> Receipt Payroll Deduction: (67.67- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	6	135.34
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	4		2	0	0	6														
135.34																							
Name of Employer: Cardinal Health, Inc Occupation: Counsel, Asst General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>1150.39</td> </tr> </table>		1150.39																					
1150.39																							

B. Full Name (Last, First, Middle Initial) David Anderson Mailing Address 7977 Wingate Place City State Zip Code <u>Delaware</u> <u>OH</u> <u>43015</u> FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60912.C75678 Amount of Each Receipt this Period <table border="1"> <tr> <td>40.00</td> </tr> </table> Receipt Payroll Deduction: (20.00- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	6	40.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	4		2	0	0	6														
40.00																							
Name of Employer: Cardinal Health, Inc Occupation: Evp, Sales/mktg - Alt Care Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>340.00</td> </tr> </table>		340.00																					
340.00																							

C. Full Name (Last, First, Middle Initial) Charles Armstrong Mailing Address 3290 Santolina Dr City State Zip Code <u>Las Vegas</u> <u>NV</u> <u>89135</u> FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60912.C75698 Amount of Each Receipt this Period <table border="1"> <tr> <td>43.08</td> </tr> </table> Receipt Payroll Deduction: (21.54- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	6	43.08
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	4		2	0	0	6														
43.08																							
Name of Employer: Cardinal Health, Inc Occupation: Architect - Financial Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>358.26</td> </tr> </table>		358.26																					
358.26																							

SUBTOTAL of Receipts This Page (optional)	218.42
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Charles Artillio		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 14 Teal Drive		Transaction ID: 60912.C75679	
City Langhorne	State PA	Zip Code 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 ▼ 825.76		
		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 8 / 0 4 / 2 0 0 6	
Mailing Address 1672 Barrington Rd		Transaction ID: 60912.C75761	
City Upper Arlington	State OH	Zip Code 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 Vp, Gov't Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 751.91		
		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 8 / 0 4 / 2 0 0 6	
Mailing Address 2761 Skelton Ln		Transaction ID: 60912.C75676	
City Blacklick	State OH	Zip Code 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 ▼ 341.53		
		Payroll Deduction: (20.09- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	168.64
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 8 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Gregory Baumli

Mailing Address 14566 Somerset Cir

City State Zip Code
Green Oaks IL 60048

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

Name of Employer Cardinal Health, Inc Occupation Svp, Manufacturing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 419.90

Date of Receipt
08 / 04 / 2006

Transaction ID: 60912.C75705

Amount of Each Receipt this Period
49.40

Receipt

Payroll Deduction: (24.70- /Pay Period)

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

Mailing Address 1723 Eagle Trl

City State Zip Code
Oxford MI 48371

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

Name of Employer Cardinal Health, Inc Occupation Dir, Reg

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
08 / 04 / 2006

Transaction ID: 60912.C75706

Amount of Each Receipt this Period
50.00

Receipt

Payroll Deduction: (25.00- /Pay Period)

C. Full Name (Last, First, Middle Initial)
David Bergstrom

Mailing Address 15 Kerby Lane

City State Zip Code
Mendham NJ 07945-2901

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 ▼ 416.67

Date of Receipt
08 / 04 / 2006

Transaction ID: 60912.C75702

Amount of Each Receipt this Period
49.02

Receipt

Payroll Deduction: (24.51- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	148.42
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 9 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
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 ▼ 425.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: 60912.C75708

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 ▼ 592.11

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: 60912.C75732

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 ▼ 1419.67

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: 60912.C75815

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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
William Bolding

Mailing Address 1116 Keats Court

City Lansdale State PA Zip Code 19446

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

Name of Employer Cardinal Health, Inc Occupation Vp, Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
08 / 04 / 2006

Transaction ID: 60912.C75691

Amount of Each Receipt this Period
40.00

Receipt

Payroll Deduction: (20.00- /Pay Period)

B. Full Name (Last, First, Middle Initial)
Scott Bostick

Mailing Address 1546 Vivaldi Drive

City Cardiff State CA Zip Code 92007

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

Name of Employer Cardinal Health, Inc Occupation Vp, Gm-supply Chain Solution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
08 / 04 / 2006

Transaction ID: 60912.C75757

Amount of Each Receipt this Period
80.00

Receipt

Payroll Deduction: (40.00- /Pay Period)

C. Full Name (Last, First, Middle Initial)
Anne Bouchenoire

Mailing Address 5772 Banavie Ct

City Dublin State OH Zip Code 43017

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

Name of Employer Cardinal Health, Inc Occupation Vp, Global Branding

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 629.00

Date of Receipt
08 / 04 / 2006

Transaction ID: 60912.C75736

Amount of Each Receipt this Period
74.00

Receipt

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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Mark Branday		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 55 Island Blvd		Transaction ID: 60912.C75729	
City State Zip Code Fox Island WA 98333		Amount of Each Receipt this Period 61.54	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc Occupation Vp, Integrated Solutions		Payroll Deduction: (30.77- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 505.03	

Full Name (Last, First, Middle Initial) B. Michael Brown		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 3103 Saddle Ridge		Transaction ID: 60912.C75623	
City State Zip Code Richmond TX 77469		Amount of Each Receipt this Period 28.46	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc Occupation Svp, Pharm Operations		Payroll Deduction: (14.23- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 241.91	

Full Name (Last, First, Middle Initial) C. Thomas Burke		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 21 Parsons Drive		Transaction ID: 60912.C75694	
City State Zip Code Swampscott MA 01907		Amount of Each Receipt this Period 41.34	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc Occupation Pres, Northeast Region		Payroll Deduction: (20.67- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.48	

SUBTOTAL of Receipts This Page (optional) ▶	131.34
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 12 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Gary Cacciatore		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 3810 Loch Glen Court		Transaction ID: 60912.C75720
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 ▼ 477.53	
		Payroll Deduction: (28.09- /Pay Period)

Full Name (Last, First, Middle Initial) B. Thomas Calhoun		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 5n496 W Lakeview Cir		Transaction ID: 60912.C75717
City State Zip Code St Charles IL 60175	Amount of Each Receipt this Period 54.14	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Pharma Dist Group	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.19	
		Payroll Deduction: (27.07- /Pay Period)

Full Name (Last, First, Middle Initial) C. Steven Callison		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1368 Lincoln Road		Transaction ID: 60912.C75621
City State Zip Code Columbus OH 43212	Amount of Each Receipt this Period 28.12	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Service Delivery	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 239.02	
		Payroll Deduction: (14.06- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ▶	138.44
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 13 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Debra Caravelli		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 4862 Vista Ridge Dr		Transaction ID: 60912.C75693
City Dublin	State OH	Zip Code 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 ▼ 338.11	Payroll Deduction: (20.19- /Pay Period)

Full Name (Last, First, Middle Initial) B. Nicole Cardoso		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 3248 Brant Street		Transaction ID: 60912.C75689
City San Diego	State CA	Zip Code 92103
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, Nat Sales Speciality Cave	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	Payroll Deduction: (20.00- /Pay Period)

Full Name (Last, First, Middle Initial) C. John Colligan		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 2 Princeton Drive		Transaction ID: 60912.C75606
City Bordentown	State NJ	Zip Code 08505
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 23.68	
Name of Employer Cardinal Health, Inc	Occupation Mgr, Project Sales & Mktg	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.28	Payroll Deduction: (11.84- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	104.06
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Douglas Cones		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 4826 Macallan Court West		Transaction ID: 60912.C75646
City Dublin	State OH	Zip Code 43017-8269
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.96
Name of Employer Cardinal Health, Inc	Occupation Vp, Finance	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.66	Payroll Deduction: (17.98- /Pay Period)

Full Name (Last, First, Middle Initial) B. Mary Cooney		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 5151 Edloe # 13207		Transaction ID: 60912.C75831
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 ▼ 862.75	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 8 / 0 4 / 2 0 0 6
Mailing Address 1306 Downs Parkway		Transaction ID: 60912.C75697
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 ▼ 365.44	Payroll Deduction: (21.52- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	180.50
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 15 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Jody Davids		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 7638 Red Bay Court		Transaction ID: 60912.C75790
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, Information Technology	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	Payroll Deduction: (50.00- /Pay Period)

Full Name (Last, First, Middle Initial) B. Ronald Dedels		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 4840 Paddington Way		Transaction ID: 60912.C75638
City Powell	State OH	Zip Code 43065
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 31.06
Name of Employer Cardinal Health, Inc	Occupation Vp, Sales Operations	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.01	Payroll Deduction: (15.53- /Pay Period)

Full Name (Last, First, Middle Initial) C. Ted Dibiase		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 8103 Catalina Island Drive		Transaction ID: 60912.C75803
City Katy	State TX	Zip Code 77494
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 122.40
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 ▼ 1007.70	Payroll Deduction: (61.20- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	253.46
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 16 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Scott Dodson		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 7000 Grate Park Dr		Transaction ID: 60912.C75650	
City State Zip Code New Albany OH 43054	Amount of Each Receipt this Period 38.50		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Controller, Nlc		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 323.55		
		Payroll Deduction: (19.25- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Gary Dolch		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 8382 Deep Run		Transaction ID: 60912.C75737	
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		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 637.50		
		Payroll Deduction: (37.50- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Charles Echols		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 5369 Lake Shore Ave		Transaction ID: 60912.C75627	
City State Zip Code Westerville OH 43082	Amount of Each Receipt this Period 29.38		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Vp, Enviro Health & Safety		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.73		
		Payroll Deduction: (14.69- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	142.88
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Joel Efken		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 109 Avalon Valley Ln		Transaction ID: 60912.C75610
City State Zip Code Fenton MO 63026	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 24.00
Name of Employer Cardinal Health, Inc	Occupation Dir, Finance Solutions	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.00	Payroll Deduction: (12.00- /Pay Period)

Full Name (Last, First, Middle Initial) B. James Egan		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 4650 Aberdeen Ave		Transaction ID: 60912.C75712
City State Zip Code Dublin OH 43016	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 51.36
Name of Employer Cardinal Health, Inc	Occupation Svp, Enterprise It	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 436.56	Payroll Deduction: (25.68- /Pay Period)

Full Name (Last, First, Middle Initial) C. Eric Ellingson		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 1308 Dancer Ct		Transaction ID: 60912.C75714
City State Zip Code Libertyville IL 60048	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 52.30
Name of Employer Cardinal Health, Inc	Occupation Dir, R&D	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 444.55	Payroll Deduction: (26.15- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	127.66
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 18 / 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Sue Ellen Erickson		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1a 21 Springfield 1a		Transaction ID: 60912.C75639
City Cranford	State NJ	Zip Code 07016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 31.34
Name of Employer Cardinal Health, Inc	Occupation Mgr II, Service	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.39	Payroll Deduction: (15.67- /Pay Period)

Full Name (Last, First, Middle Initial) B. Leeann Evensen		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1423 Shady Valley		Transaction ID: 60912.C75633
City Sugar Land	State TX	Zip Code 77479
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Cardinal Health, Inc	Occupation Dir, Business Partner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	Payroll Deduction: (15.00- /Pay Period)

Full Name (Last, First, Middle Initial) C. Jo Anne Fasetti		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 1163 Vineyard Dr		Transaction ID: 60912.C75762
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 ▼ 761.26	Payroll Deduction: (44.78- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	150.90
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Eric Feltes		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 718 Woodridge Trail		Transaction ID: 60912.C75699	
City State Zip Code Mchenry IL 60050	Amount of Each Receipt this Period 44.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Mgr, Business Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 374.00		
		Payroll Deduction: (22.00- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Nathaniel Filler		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 7639 Presidium Loop		Transaction ID: 60912.C75651	
City State Zip Code Galena OH 43021	Amount of Each Receipt this Period 39.24		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Mgr, Gov't Relations - St		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.54		
		Payroll Deduction: (19.62- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Stephen Flannery		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 275 East Center St		Transaction ID: 60912.C75643	
City State Zip Code Shavertown PA 18708	Amount of Each Receipt this Period 33.24		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Svp, Medication Solutions		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.82		
		Payroll Deduction: (16.62- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	116.48
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 20 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Karen Flynn		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 205 Rising Hill Ln		Transaction ID: 60912.C75682	
City State Zip Code Chester Springs PA 19425	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 Vp, Global Accounts Team		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) B. Brendan Ford		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 798 Tweed Court		Transaction ID: 60912.C75596	
City State Zip Code Worthington OH 43085	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			
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 ▼ 1700.00		

Full Name (Last, First, Middle Initial) C. David Fries		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 4491 Hickory Rock Dr		Transaction ID: 60912.C75631	
City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 30.00		Receipt Payroll Deduction: (15.00- /Pay Period)
FEC ID number of contributing federal political committee. C			
Name of Employer Cardinal Health, Inc	Occupation Deployment Leader, Corporate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00		

SUBTOTAL of Receipts This Page (optional) ▶	270.00
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 21 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Shawn Gallagher

Mailing Address 9501 Bartons Creekrd

City Raleigh State NC Zip Code 27615

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 ▼ 340.00

Date of Receipt
08 / 04 / 2006

Transaction ID: 60912.C75688

Amount of Each Receipt this Period
40.00

Receipt

Payroll Deduction: (20.00- /Pay Period)

B. Full Name (Last, First, Middle Initial)
Robert Gentile

Mailing Address 403 Stuart Ct

City Thorofare State NJ Zip Code 08086

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 ▼ 249.56

Date of Receipt
08 / 04 / 2006

Transaction ID: 60912.C75626

Amount of Each Receipt this Period
29.36

Receipt

Payroll Deduction: (14.68- /Pay Period)

C. Full Name (Last, First, Middle Initial)
Robert Giacalone

Mailing Address 7471 Balfoure Circle

City Dublin State OH Zip Code 43017

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

Name of Employer Cardinal Health, Inc Occupation Svp, Reg Affairs/chf Reg Cnsl

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 655.52

Date of Receipt
08 / 04 / 2006

Transaction ID: 60912.C75739

Amount of Each Receipt this Period
77.12

Receipt

Payroll Deduction: (38.56- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	146.48
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. James Gill		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1529 Woodvale Avenue		Transaction ID: 60912.C75635	
City State Zip Code Deerfield IL 60015	Amount of Each Receipt this Period 30.00		Receipt Payroll Deduction: (15.00- /Pay Period)
FEC ID number of contributing federal political committee. C			
Name of Employer Cardinal Health, Inc	Occupation Vp, Strat Initiatives		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00		

Full Name (Last, First, Middle Initial) B. Robert Glover		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 5633 N Kostner Ave		Transaction ID: 60912.C75713	
City State Zip Code Chicago IL 60646	Amount of Each Receipt this Period 52.26		Receipt Payroll Deduction: (26.13- /Pay Period)
FEC ID number of contributing federal political committee. C			
Name of Employer Cardinal Health, Inc	Occupation Vp, Hlth Sys		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 444.21		

Full Name (Last, First, Middle Initial) C. David Goldsberry		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 321 St Andrews Ln		Transaction ID: 60912.C75648	
City State Zip Code Gurnee IL 60031	Amount of Each Receipt this Period 36.92		Receipt Payroll Deduction: (18.46- /Pay Period)
FEC ID number of contributing federal political committee. C			
Name of Employer Cardinal Health, Inc	Occupation Svp, Govt Sales And Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.28		

SUBTOTAL of Receipts This Page (optional) ▶	119.18
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Theresa Gould		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 3418 Big Hickory Dr.		Transaction ID: 60912.C75826
City Kingwood	State TX	Zip Code 77345
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.58
Name of Employer Cardinal Health, Inc	Occupation Vp, Hr Business Partner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 272.27	Payroll Deduction: (17.29- /Pay Period)

Full Name (Last, First, Middle Initial) B. Michael Groesbeck		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 33916 Summerfield		Transaction ID: 60912.C75647
City Gurnee	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.54
Name of Employer Cardinal Health, Inc	Occupation Svp, Qra	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.03	Payroll Deduction: (18.27- /Pay Period)

Full Name (Last, First, Middle Initial) C. L Glenn Hall		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 6678 Willow Grove Ln Circle #1502		Transaction ID: 60912.C75721
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 58.52
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 ▼ 497.42	Payroll Deduction: (29.26- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	129.64
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 24 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Troy Hanson		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 5622 Dorsey Drive		Transaction ID: 60912.C75700	
City Columbus	State OH	Zip Code 43235	Amount of Each Receipt this Period 44.44
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Dir, Business Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 377.74		
		Payroll Deduction: (22.22- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Michael Harris		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 2254 W Wolfram St		Transaction ID: 60912.C75622	
City Chicago	State IL	Zip Code 60618	Amount of Each Receipt this Period 28.38
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Supply Chain		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.23		
		Payroll Deduction: (14.19- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Mark Hartman		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 7677 Tartan Fields Dr		Transaction ID: 60912.C75819	
City Dublin	State OH	Zip Code 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, Business Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1507.90		
		Payroll Deduction: (88.70- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	250.22
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 / 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Linda Harty		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1761 Roxbury Rd		Transaction ID: 60912.C75598	
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 Evp, Treasurer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1758.65		
		Payroll Deduction: (103.4-5/Pay Period)	

Full Name (Last, First, Middle Initial) B. Richard Heard		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 17711 Briar Arbor		Transaction ID: 60912.C75707	
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 Svp, Ips Health Systems		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		
		Payroll Deduction: (25.00-/Pay Period)	

Full Name (Last, First, Middle Initial) C. Mark Henderson		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 6308 Mccoy		Transaction ID: 60912.C75701	
City State Zip Code Shawnee KS 66226	Amount of Each Receipt this Period 23.94		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Dir, Reg		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.84		
		Payroll Deduction: (23.94-/Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	280.84
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 26 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) Mark Henderson Mailing Address 6308 Mccoy City State Zip Code Shawnee KS 66226 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6 Transaction ID: 60912.C76128 Amount of Each Receipt this Period 8.83 Receipt Payroll Deduction: (8.83/- Pay Period)
Name of Employer: Cardinal Health, Inc Occupation: Dir, Reg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 222.67		

B. Full Name (Last, First, Middle Initial) James Hethcox Mailing Address 5442 Haverhill Drive 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 8 / 0 4 / 2 0 0 6 Transaction ID: 60912.C75730 Amount of Each Receipt this Period 65.38 Receipt Payroll Deduction: (32.69- /Pay Period)
Name of Employer: Cardinal Health, Inc Occupation: Is Medication Executive, Ips Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 555.73		

C. Full Name (Last, First, Middle Initial) Jay Hexamer Mailing Address 770 Westwind Ln City State Zip Code Alpharetta GA 30005 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6 Transaction ID: 60912.C75614 Amount of Each Receipt this Period 25.60 Receipt Payroll Deduction: (12.80- /Pay Period)
Name of Employer: Cardinal Health, Inc Occupation: Vp, Sp Lab Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 217.60		

SUBTOTAL of Receipts This Page (optional)	99.81
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Robin Hoke		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 2134 Yorkshire Road		Transaction ID: 60912.C75740
City State Zip Code Columbus OH 43221	Amount of Each Receipt this Period 79.12	
FEC ID number of contributing federal political committee. C		Receipt Payroll Deduction: (39.56- /Pay Period)
Name of Employer Cardinal Health, Inc	Occupation Svp, Strategic Initiatives	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 670.76	

Full Name (Last, First, Middle Initial) B. James Homan		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 520 Eden Park Drive Apt # 17103		Transaction ID: 60912.C75613
City State Zip Code Franklin TN 37067	Amount of Each Receipt this Period 25.60	
FEC ID number of contributing federal political committee. C		Receipt Payroll Deduction: (12.80- /Pay Period)
Name of Employer Cardinal Health, Inc	Occupation Dir, Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.60	

Full Name (Last, First, Middle Initial) C. John Howard		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 305 Vine Ct		Transaction ID: 60912.C75632
City State Zip Code Mandeville LA 70448	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		Receipt Payroll Deduction: (15.00- /Pay Period)
Name of Employer Cardinal Health, Inc	Occupation Cnslt, Franchise Business	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

SUBTOTAL of Receipts This Page (optional) ▶	134.72
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 28 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Stephen Inacker		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1490 S Ridge Rd		Transaction ID: 60912.C75710	
City Lake Forest	State IL	Amount of Each Receipt this Period 50.36	
Zip Code 60045		Receipt	
FEC ID number of contributing federal political committee. C		Payroll Deduction: (25.18- /Pay Period)	
Name of Employer Cardinal Health, Inc	Occupation Pres, Hosp Supply Dist	Aggregate Year-to-Date ▼ 428.06	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Brian Jackson		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 9055 Tartan Flds Dr		Transaction ID: 60912.C75641	
City Dublin	State OH	Amount of Each Receipt this Period 32.00	
Zip Code 43017		Receipt	
FEC ID number of contributing federal political committee. C		Payroll Deduction: (16.00- /Pay Period)	
Name of Employer Cardinal Health, Inc	Occupation Svp, Ips Sales Operations	Aggregate Year-to-Date ▼ 272.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Renard Jackson		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 744 Tennis Ave		Transaction ID: 60912.C75675	
City Ambler	State PA	Amount of Each Receipt this Period 40.18	
Zip Code 19002		Receipt	
FEC ID number of contributing federal political committee. C		Payroll Deduction: (20.09- /Pay Period)	
Name of Employer Cardinal Health, Inc	Occupation Evp, Packaging - Contract	Aggregate Year-to-Date ▼ 341.53	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	122.54
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 29 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Stephen Johnson		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 360 Ormond St Se		Transaction ID: 60912.C75715
City Atlanta	State GA	Zip Code 30315
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 52.52
Name of Employer Cardinal Health, Inc	Occupation Vp, Distribution Srvc	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 446.42	Payroll Deduction: (26.26- /Pay Period)

Full Name (Last, First, Middle Initial) B. Remi Kajogbola		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 15751 Sheridan St #149		Transaction ID: 60912.C75794
City Fort Lauderdale	State FL	Zip Code 33331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 109.62
Name of Employer Cardinal Health, Inc	Occupation Rvp, Corporate Solutions	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 862.61	Payroll Deduction: (54.81- /Pay Period)

Full Name (Last, First, Middle Initial) C. Michael Kennedy		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 4783 Vista Ridge Dr		Transaction ID: 60912.C75719
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 ▼ 473.79	Payroll Deduction: (27.87- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	217.88
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Steven Koester		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 2122 Autumn Wood Dr		Transaction ID: 60912.C75634
City St Charles	State MO	Zip Code 63303
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.00	
Name of Employer Cardinal Health, Inc	Occupation Dir, Operations - Ellipticare	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	Payroll Deduction: (15.00- /Pay Period)

Full Name (Last, First, Middle Initial) B. Fred Kohut		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 824 Interlaken Lane		Transaction ID: 60912.C75630
City Libertyville	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.00	
Name of Employer Cardinal Health, Inc	Occupation Vp, Sales	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	Payroll Deduction: (15.00- /Pay Period)

Full Name (Last, First, Middle Initial) C. Michael Kopp		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 4050 Whispering Pines Court		Transaction ID: 60912.C75711
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 ▼ 431.46	Payroll Deduction: (25.38- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	110.76
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 37248 N Deerpath Dr

City State Zip Code
Lake Villa IL 60046

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

Name of Employer Cardinal Health, Inc Occupation Dir, Eit

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt
08 / 04 / 2006

Transaction ID: 60912.C75609

Amount of Each Receipt this Period
24.00

Receipt

Payroll Deduction: (12.00- /Pay Period)

B. Full Name (Last, First, Middle Initial)
Joseph Kubicek

Mailing Address 443 Douglas

City State Zip Code
Lake Forest IL 60045

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

Name of Employer Cardinal Health, Inc Occupation Svp, Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.25

Date of Receipt
08 / 04 / 2006

Transaction ID: 60912.C75703

Amount of Each Receipt this Period
49.18

Receipt

Payroll Deduction: (24.59- /Pay Period)

C. Full Name (Last, First, Middle Initial)
Ronald Labrum

Mailing Address 1325 Canterbury Cir

City State Zip Code
Libertyville IL 60048

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

Name of Employer Cardinal Health, Inc Occupation Chmn/ceo, Supply Chain Srvcs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1972.00

Date of Receipt
08 / 04 / 2006

Transaction ID: 60912.C75608

Amount of Each Receipt this Period
232.00

Receipt

Payroll Deduction: (116.0- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	305.18
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Frank Lafasto		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1451 S Kurtis Lane		Transaction ID: 60912.C75615	
City State Zip Code Lake Forest IL 60045	Amount of Each Receipt this Period 246.08		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Org Effectiveness		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2091.68		
		Payroll Deduction: (123.0-4/Pay Period)	

Full Name (Last, First, Middle Initial) B. Jeanne Lasheff		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 220 W Lincoln Ave		Transaction ID: 60912.C75624	
City State Zip Code Libertyville IL 60048	Amount of Each Receipt this Period 28.62		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Eit		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.27		
		Payroll Deduction: (14.31-/Pay Period)	

Full Name (Last, First, Middle Initial) C. Clay Lassiter		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 2023 Cannonbury Lane		Transaction ID: 60912.C75827	
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 Dir, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.58		
		Payroll Deduction: (24.12-/Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	322.94
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Steve Lawrence		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 4868 Carrigan Ridge		Transaction ID: 60912.C75764	
City Dublin	State OH	Zip Code 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 ▼ 847.11		
		Payroll Deduction: (49.83- /Pay Period)	

Full Name (Last, First, Middle Initial) B. James Leitl		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 95 Arboretum Dr		Transaction ID: 60912.C75652	
City North Barrington	State IL	Zip Code 60010	Amount of Each Receipt this Period 39.42
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp/gm, V Mueller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.43		
		Payroll Deduction: (19.71- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Michael Lynch		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 550 E Rosemary		Transaction ID: 60912.C75644	
City Lake Forest	State IL	Zip Code 60045	Amount of Each Receipt this Period 323.08
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Group Pres, Med Products Mfg		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2568.41		
		Payroll Deduction: (161.5- 4/Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	462.16
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 34 / 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Donna Mann		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 6666 Mcvey Blvd		Transaction ID: 60912.C75696	
City State Zip Code West Worthington OH 43235	Amount of Each Receipt this Period 42.30		
FEC ID number of contributing federal political committee. C	Receipt		
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 ▼ 347.58		
		Payroll Deduction: (21.15- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Samuel Manzanares		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1205 Brown Ridge		Transaction ID: 60912.C75793	
City State Zip Code El Paso TX 79912	Amount of Each Receipt this Period 107.70		
FEC ID number of contributing federal political committee. C	Receipt		
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 ▼ 879.25		
		Payroll Deduction: (53.85- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Samuel Manzanares		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 1205 Brown Ridge		Transaction ID: 60912.C76120	
City State Zip Code El Paso TX 79912	Amount of Each Receipt this Period 78.51		
FEC ID number of contributing federal political committee. C	Receipt		
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 ▼ 957.76		
		Payroll Deduction: (78.51- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	228.51
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Robin Martial		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1741 Haggin Grove W		Transaction ID: 60912.C75690	
City State Zip Code Carmichael CA 95608	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 Evp, Sales & Mktg- Hlth Sy		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		
		Payroll Deduction: (20.00- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Janice Mccampbell		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 8001 Millenium Drive		Transaction ID: 60912.C75718	
City State Zip Code Raleigh NC 27614	Amount of Each Receipt this Period 27.63		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Dir, Engineering - Disposables		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 386.82		
		Payroll Deduction: (27.63- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Janice Mccampbell		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address 8001 Millenium Drive		Transaction ID: 60912.C76008	
City State Zip Code Raleigh NC 27614	Amount of Each Receipt this Period 22.10		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Dir, Engineering - Disposables		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 408.92		
		Payroll Deduction: (22.10- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	89.73
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 36 / 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Lindy Mclean		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 7272 Black Abbey Ct		Transaction ID: 60912.C75728	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 61.28		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Mgr, Key Account		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.88		
		Payroll Deduction: (30.64- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Bruce Mcwhinney		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 205 Presque Isle Ln		Transaction ID: 60912.C75681	
City State Zip Code Chapel Hill NC 27514	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/cln Imprv		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		
		Payroll Deduction: (20.00- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Steven Merkin		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1481 Country Ln		Transaction ID: 60912.C75759	
City State Zip Code Deerfield IL 60015	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 Svp, Hr Business Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		
		Payroll Deduction: (40.00- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	181.28
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Mark Mitchell		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 6604 Cresent Lake Dr		Transaction ID: 60912.C75731	
City State Zip Code Lakeland FL 33813	Amount of Each Receipt this Period 68.08		
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 ▼ 561.78		
		Payroll Deduction: (34.04- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Robert Myers		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 592 S. Dunes Drive Cardinal (mps) Expat		Transaction ID: 60912.C75823	
City State Zip Code Pawleys Island SC 29585	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 ▼ 1645.94		
		Payroll Deduction: (96.82- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Frederick Nelson		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 7303 Deacon Court		Transaction ID: 60912.C75734	
City State Zip Code Dublin OH 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 ▼ 612.17		
		Payroll Deduction: (36.01- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	333.74
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 38 / 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) Michael Orscheln Mailing Address 601 Buckingham Pl City State Zip Code <u>Libertyville</u> <u>IL</u> <u>60048</u> FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60912.C75687 Amount of Each Receipt this Period <table border="1"> <tr> <td>40.00</td> </tr> </table> Receipt Payroll Deduction: (20.00- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	6	40.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	4		2	0	0	6														
40.00																							
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 ▼ <table border="1"> <tr> <td>340.00</td> </tr> </table>		340.00																					
340.00																							

B. Full Name (Last, First, Middle Initial) Mark Overman Mailing Address 900 Wyndham Hill Ct City State Zip Code <u>Southlake</u> <u>TX</u> <u>76092</u> FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60912.C75637 Amount of Each Receipt this Period <table border="1"> <tr> <td>31.06</td> </tr> </table> Receipt Payroll Deduction: (15.53- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	6	31.06
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	4		2	0	0	6														
31.06																							
Name of Employer: Cardinal Health, Inc Occupation: Vp, Hlth Sys Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>264.01</td> </tr> </table>		264.01																					
264.01																							

C. Full Name (Last, First, Middle Initial) William Owad Mailing Address 7558 Heatherwood Ln City State Zip Code <u>Dublin</u> <u>OH</u> <u>43017</u> FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60912.C75807 Amount of Each Receipt this Period <table border="1"> <tr> <td>155.76</td> </tr> </table> Receipt Payroll Deduction: (77.88- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	6	155.76
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	4		2	0	0	6														
155.76																							
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 ▼ <table border="1"> <tr> <td>1323.96</td> </tr> </table>		1323.96																					
1323.96																							

SUBTOTAL of Receipts This Page (optional)	226.82
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Joseph Papa		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address One Deerhill Rd		Transaction ID: 60912.C75599	
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 Group President- Pts		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1831.41		
Payroll Deduction: (107.7-3/Pay Period)			

Full Name (Last, First, Middle Initial) B. Donald Patterson		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 19463 West 52nd Dr.		Transaction ID: 60912.C75619	
City State Zip Code Golden CO 80403	Amount of Each Receipt this Period 26.90		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Dir, Technical		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.65		
Payroll Deduction: (13.45-/Pay Period)			

Full Name (Last, First, Middle Initial) C. Thomas Perrine		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 7249 Landon Lane		Transaction ID: 60912.C75684	
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 ▼ 340.00		
Payroll Deduction: (20.00-/Pay Period)			

SUBTOTAL of Receipts This Page (optional) ▶	282.36
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 40 / 60
<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. Kevin Peters		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 465 Fourth Fairway Drive		Transaction ID: 60912.C75763	
City State Zip Code Roswell GA 30076		Amount of Each Receipt this Period 97.70	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc		Occupation Evp, Ips Sales Se	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 817.06	
		Payroll Deduction: (48.85- /Pay Period)	

Full Name (Last, First, Middle Initial) B. William Peters		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1532 Lost Lake Drive Drive		Transaction ID: 60912.C75645	
City State Zip Code Keller TX 76248		Amount of Each Receipt this Period 35.58	
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 ▼ 302.43	
		Payroll Deduction: (17.79- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Aaron Pitts		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 5014 Closeburn Ct		Transaction ID: 60912.C75620	
City State Zip Code Dublin OH 43017		Amount of Each Receipt this Period 26.92	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc		Occupation Vp, Strategy & Bus Develop	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 228.82	
		Payroll Deduction: (13.46- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	160.20
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. George Plava		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 3526 Pembroke Dr		Transaction ID: 60912.C75832	
City Richmond	State TX	Zip Code 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 ▼ 1118.60		
		Payroll Deduction: (65.80- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Kathy Popejoy		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 11127 W 59th Ave		Transaction ID: 60912.C75674	
City Arvada	State CO	Zip Code 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 ▼ 341.19		
		Payroll Deduction: (20.07- /Pay Period)	

Full Name (Last, First, Middle Initial) C. William Rampy		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 103 Foxglove Ln		Transaction ID: 60912.C75791	
City Bentonville	State AR	Zip Code 72712	Amount of Each Receipt this Period 100.96
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Franchise Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 656.24		
		Payroll Deduction: (50.48- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	272.70
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 42 / 60
	<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"/>	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Stephen Reardon		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 5078 Breckenhurst Dr		Transaction ID: 60912.C75677	
City Hilliard	State OH	Zip Code 43026	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, Quality		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		
		Payroll Deduction: (20.00- /Pay Period)	

Full Name (Last, First, Middle Initial) B. David Render		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 6909 Maris Ct		Transaction ID: 60912.C75607	
City Burlleson	State TX	Zip Code 76028	Amount of Each Receipt this Period 23.70
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Dir, Ops		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.45		
		Payroll Deduction: (11.85- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Cynthia Rhomberg		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2006	
Mailing Address 9379 Redan Court		Transaction ID: 60912.C75683	
City Dublin	State OH	Zip Code 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 Vp, Corp Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		
		Payroll Deduction: (20.00- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	103.70
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 43 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Sandra Rigopoulos		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 307 S Hi Lusi Ave		Transaction ID: 60912.C75818
City Mt Prospect	State IL	Zip Code 60056
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 174.52
Name of Employer Cardinal Health, Inc	Occupation Vp, Customer Solutions	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1421.02	Payroll Deduction: (87.26- /Pay Period)

Full Name (Last, First, Middle Initial) B. Jorge Rivera Crespo		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address Calle 13 #0-28 Villa Del Carmen		Transaction ID: 60912.C75617
City Gurabo	State PR	Zip Code 00778
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.20
Name of Employer Cardinal Health, Inc	Occupation Mgr, Qa	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.70	Payroll Deduction: (13.10- /Pay Period)

Full Name (Last, First, Middle Initial) C. Mark Rosenbaum		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6
Mailing Address 6565 Lockhart Lane		Transaction ID: 60912.C75628
City Dublin	State OH	Zip Code 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 ▼ 2436.27	Payroll Deduction: (143.3- 1/Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	487.34
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 44 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Claudia Russell		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 5064 Seagrove Cove		Transaction ID: 60912.C75760	
City State Zip Code San Diego CA 92130	Amount of Each Receipt this Period 81.74		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Vp, Mktg - Strategic		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 649.83		
		Payroll Deduction: (40.87- /Pay Period)	

Full Name (Last, First, Middle Initial) B. James Saponaro		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 9392 Redan Court		Transaction ID: 60912.C75817	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 173.16		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Svp, Business Units- Retail		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1471.86		
		Payroll Deduction: (86.58- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Richard Schindewolf		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 6507 Burning Tree		Transaction ID: 60912.C75727	
City State Zip Code Mchenry IL 60050	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Vp, Gm		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00		
		Payroll Deduction: (30.00- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	314.90
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 45 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. David Schlotterbeck		Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2006
Mailing Address 12 Hermitage Lane		Transaction ID: 60912.C75597
City Laguna Niguel	State CA	Zip Code 92677
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Cardinal Health, Inc	Occupation Ceo-pharmaceutical & Medic	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00	Payroll Deduction: (100.0- 0/Pay Period)

Full Name (Last, First, Middle Initial) B. Douglas Schmidt		Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2006
Mailing Address 31145 Reigate Ln		Transaction ID: 60912.C75640
City Green Oaks	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.12
Name of Employer Cardinal Health, Inc	Occupation Vp, Neuro/spine & Int&apos	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.35	Payroll Deduction: (16.06- /Pay Period)

Full Name (Last, First, Middle Initial) C. Michael Scrase		Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2006
Mailing Address 8358 Davington		Transaction ID: 60912.C75716
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 53.04
Name of Employer Cardinal Health, Inc	Occupation Dir, Vendor Management	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.84	Payroll Deduction: (26.52- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	285.16
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 46 / 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Frank Segrave		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 5371 Gordon Way		Transaction ID: 60912.C75686	
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, Purchasing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		
		Payroll Deduction: (20.00- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Steven Seide		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 30 Nutmeg Ln		Transaction ID: 60912.C75636	
City State Zip Code North Andover MA 01845	Amount of Each Receipt this Period 30.28		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Reg Ambulatory Care		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.38		
		Payroll Deduction: (15.14- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Kendell Sherrer		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 7720 Heatherwood Ln		Transaction ID: 60912.C75692	
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 Business Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.87		
		Payroll Deduction: (20.11- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	110.50
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 47 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Jesse Sims		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 11014 Black Falls Ct		Transaction ID: 60912.C75830
City State Zip Code Sugar Land TX 77478	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00
Name of Employer Cardinal Health, Inc	Occupation Mgr, Service - Technical	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	Payroll Deduction: (50.00- /Pay Period)

Full Name (Last, First, Middle Initial) B. Thomas Slagle		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 1340 Kimmer Ct		Transaction ID: 60912.C75629
City State Zip Code Lake Forest IL 60045	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.00
Name of Employer Cardinal Health, Inc	Occupation Group Pres, Medical Supply Cha	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	Payroll Deduction: (15.00- /Pay Period)

Full Name (Last, First, Middle Initial) C. Douglas Smith		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 544 Restoration Dr		Transaction ID: 60912.C75625
City State Zip Code Marysville OH 43040	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 28.84
Name of Employer Cardinal Health, Inc	Occupation Spec, Security	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.14	Payroll Deduction: (14.42- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	158.84
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 48 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Jake St. Philip		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 4727 Plummer Court		Transaction ID: 60912.C75685
City San Diego	State CA	Zip Code 92130
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 40.00
Name of Employer Cardinal Health, Inc	Occupation Evp, Ips Sales West	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	Payroll Deduction: (20.00- /Pay Period)

Full Name (Last, First, Middle Initial) B. Cornell Stamoran		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 3 Matrick Court		Transaction ID: 60912.C75804
City Hillsborough	State NJ	Zip Code 08844
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 129.24
Name of Employer Cardinal Health, Inc	Occupation Vp, Strategic Intel & Plan	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1098.54	Payroll Deduction: (64.62- /Pay Period)

Full Name (Last, First, Middle Initial) C. Mark Stauffer		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 10644 Dundee Ct		Transaction ID: 60912.C75792
City Powell	State OH	Zip Code 43065
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 102.72
Name of Employer Cardinal Health, Inc	Occupation Svp, Audit	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 873.12	Payroll Deduction: (51.36- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	271.96
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 49 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Meriann Stockwell

Mailing Address 105 16th Street

City State Zip Code
Belleair Beach FL 33786

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

Name of Employer Cardinal Health, Inc Occupation Dir, Gbl Strat Procurement

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 326.06

Date of Receipt
08 / 04 / 2006

Transaction ID: 60912.C75649

Amount of Each Receipt this Period
38.36

Receipt

Payroll Deduction: (19.18- /Pay Period)

B. Full Name (Last, First, Middle Initial)
Suzanne Stoddard

Mailing Address P.o. Box 812

City State Zip Code
Dublin OH 43017

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

Name of Employer Cardinal Health, Inc Occupation Dir, Investor Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt
08 / 04 / 2006

Transaction ID: 60912.C75611

Amount of Each Receipt this Period
25.00

Receipt

Payroll Deduction: (12.50- /Pay Period)

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

Mailing Address 7703 E 85th St

City State Zip Code
Tulsa OK 74133

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

Name of Employer Cardinal Health, Inc Occupation Mgr, Proc Supply Chain Solutns

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.89

Date of Receipt
08 / 04 / 2006

Transaction ID: 60912.C75725

Amount of Each Receipt this Period
3.30

Receipt

Payroll Deduction: (3.30- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	66.66
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 50 / 60
	<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 8 / 0 4 / 2 0 0 6	
Mailing Address 7703 E 85th St		Transaction ID: 60912.C75821	
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 ▼ 300.24		
		Payroll Deduction: (9.35/- Pay Period)	

Full Name (Last, First, Middle Initial) B. Greg Storm		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 7703 E 85th St		Transaction ID: 60912.C75600	
City State Zip Code Tulsa OK 74133	Amount of Each Receipt this Period 11.00		
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 ▼ 311.24		
		Payroll Deduction: (11.00-/Pay Period)	

Full Name (Last, First, Middle Initial) C. Greg Storm		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 7703 E 85th St		Transaction ID: 60912.C75612	
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 ▼ 336.62		
		Payroll Deduction: (12.69-/Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	45.73
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 51 / 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Joseph Strack		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 29420 Cambridge Ct		Transaction ID: 60912.C75735
City Agoura Hills	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 74.00
Name of Employer Cardinal Health, Inc	Occupation Rvp, Distribution	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 629.00	Payroll Deduction: (37.00- /Pay Period)

Full Name (Last, First, Middle Initial) B. Thomas Stuart		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 2 Jonah Ct Po Box 615		Transaction ID: 60912.C75733
City Peapack	State NJ	Zip Code 07977
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer Cardinal Health, Inc	Occupation Pres, Oral Technologies	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00	Payroll Deduction: (35.00- /Pay Period)

Full Name (Last, First, Middle Initial) C. Robert Summers		Date of Receipt MM / DD / YYYY 08 / 04 / 2006
Mailing Address 146 Chasely Circle		Transaction ID: 60912.C75704
City Powell	State OH	Zip Code 43065
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 49.24
Name of Employer Cardinal Health, Inc	Occupation Vp, Sales - Healthsystems	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 418.54	Payroll Deduction: (24.62- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	193.24
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 52 / 60
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial) Mary Jane Tew Mailing Address 6315 Duffy Rd City State Zip Code Delaware OH 43015 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6 Transaction ID: 60912.C75709 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 ▼ 425.00		

B. Full Name (Last, First, Middle Initial) Ethan Trull Mailing Address 2663 Marl Oak Dr City State Zip Code Highland Park IL 60035 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6 Transaction ID: 60912.C75642 Amount of Each Receipt this Period 32.48 Receipt Payroll Deduction: (16.24- /Pay Period)
Name of Employer: Cardinal Health, Inc Occupation: Counsel, Asst General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 276.08		

C. 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 8 / 0 4 / 2 0 0 6 Transaction ID: 60912.C75738 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 ▼ 647.02		

SUBTOTAL of Receipts This Page (optional)	158.60
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 53 / 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Robert Walter		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address C/o Cardinal Health 7000 Cardinal Place		Transaction ID: 60912.C75653	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 384.04		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Chairman	Payroll Deduction: (192.0- 2/Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3264.34		

Full Name (Last, First, Middle Initial) B. Carole Watkins		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 1967 Woodlands Place		Transaction ID: 60912.C75758	
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 Chief Human Resources Officer	Payroll Deduction: (40.00- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00		

Full Name (Last, First, Middle Initial) C. Curt Witte		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address 6724 Perimeter Loop Rd #232		Transaction ID: 60912.C75816	
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	Payroll Deduction: (85.64- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1455.88		

SUBTOTAL of Receipts This Page (optional) ▶	635.32
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:	PAGE 54 / 60
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

Mailing Address 44 Lake Mist Drive

City State Zip Code
Sugar Land TX 77479

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

Name of Employer Cardinal Health, Inc Occupation Counsel, Sr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: 60912.C75680

Amount of Each Receipt this Period
40.00

Receipt

Payroll Deduction: (20.00- /Pay Period)

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

Mailing Address 9761 Erin Woods Dr

City State Zip Code
Dublin OH 43017

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

Name of Employer Cardinal Health, Inc Occupation Svp, Prof & Gov't Rel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2097.97

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: 60912.C75616

Amount of Each Receipt this Period
246.82

Receipt

Payroll Deduction: (123.4- 1/Pay Period)

SUBTOTAL of Receipts This Page (optional)	286.82
TOTAL This Period (last page this line number only)	10228.34

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 55 / 60	
	(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

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

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

Mailing Address 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 ▼
6979.61

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2006

Transaction ID: 60815.C75527

Amount of Each Receipt this Period
1077.02

Interest Received

SUBTOTAL of Receipts This Page (optional)	▶	1077.02
TOTAL This Period (last page this line number only)	▶	1077.02

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

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) A. Hobson For Congress		Transaction ID: 60912.E774 Date of Disbursement 08 / 16 / 2006
Mailing Address 82 W. Columbia Street		Amount of Each Disbursement this Period 2500.00
City Springfield State OH Zip Code 45502-	Purpose of Disbursement DIRECT CONTRIBUTION	
Candidate Name DAVID LEE HOBSON		DIRECT CONTRIBUTION
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 07	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jon Kyl For U.S. Senate		Transaction ID: 60912.E773 Date of Disbursement 08 / 16 / 2006
Mailing Address 507 Capitol Court, NE # 100		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20002-	Purpose of Disbursement DIRECT CONTRIBUTION	
Candidate Name JON L KYL		DIRECT CONTRIBUTION
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Talent for Senate		Transaction ID: 60912.E776 Date of Disbursement 08 / 16 / 2006
Mailing Address 509 Capitol Court, NE #100		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20002-	Purpose of Disbursement DIRECT CONTRIBUTION	
Candidate Name JAMES MATTHES TALENT		DIRECT CONTRIBUTION
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6500.00
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

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

Full Name (Last, First, Middle Initial) A. Tiberi for Congress		Transaction ID: 60815.E770 Date of Disbursement 08 / 08 / 2006
Mailing Address 2021 E. Dublin - Granville Road Suite 2000		Amount of Each Disbursement this Period 3000.00
City Columbus State OH Zip Code 43229-	DIRECT CONTRIBUTION	
Purpose of Disbursement DIRECT CONTRIBUTION		Category/ Type
Candidate Name PATRICK J TIBERI		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tiberi for Congress		Transaction ID: 60912.E779 Date of Disbursement 08 / 22 / 2006
Mailing Address 2021 E. Dublin - Granville Road Suite 2000		Amount of Each Disbursement this Period -3000.00
City Columbus State OH Zip Code 43229-	VOID	
Purpose of Disbursement VOID		Category/ Type
Candidate Name PATRICK J TIBERI		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Tiberi for Congress		Transaction ID: 60912.E780 Date of Disbursement 08 / 22 / 2006
Mailing Address 2021 E. Dublin - Granville Road Suite 2000		Amount of Each Disbursement this Period 3000.00
City Columbus State OH Zip Code 43229-	DIRECT CONTRIBUTION	
Purpose of Disbursement DIRECT CONTRIBUTION		Category/ Type
Candidate Name PATRICK J TIBERI		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	9500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Committee for Joyce Beatty		Transaction ID: 60912.E782 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address 233 South High Street		Amount of Each Disbursement this Period 2000.00
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. Committee to Elect Bill Harris		Transaction ID: 60912.E781 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address 1238 Township Road #1506		Amount of Each Disbursement this Period 7500.00
City Ashland State OH Zip Code 44805-	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. Friends of George Kenney		Transaction ID: 60912.E775 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address P.O. Box 11524		Amount of Each Disbursement this Period 250.00
City Philadelphia State PA Zip Code 19116-	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) ▶	9750.00
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 59 / 60

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

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

Full Name (Last, First, Middle Initial) A. Plescia For Assembly 2006		Transaction ID: 60912.E777 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 8130 La Mesa Blvd. Suite 202		Amount of Each Disbursement this Period 2000.00
City La Mesa State CA Zip Code 91941-	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. Californians for Schwarzenegger		Transaction ID: 60912.E778 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address P.O. Box 471		Amount of Each Disbursement this Period 5000.00
City Sacramento State CA Zip Code 95812-	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. Citizens for Geoffrey Smith		Transaction ID: 60912.E784 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 865 Macon Alley		Amount of Each Disbursement this Period 500.00
City Columbus State OH Zip Code 43206-	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) ▶	7500.00
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 60 / 60

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

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

Full Name (Last, First, Middle Initial) A. Citizens for Larry Wolpert		Transaction ID: 60912.E783																					
Mailing Address 100 South Third Street		Date of Disbursement																					
City Columbus State OH Zip Code 43215-		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		3	0		2	0	0	6														
Purpose of Disbursement DIRECT CONTRIBUTION		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: right;">500.00</td> </tr> </table>		500.00																			
500.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006																					
State: District:		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
		Category/ Type																					

SUBTOTAL of Disbursements This Page (optional) ►

500.00

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

17750.00