

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		<input type="text" value="172227.12"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="136160.07"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="25948.89"/>	<input type="text" value="160929.18"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="162108.96"/>	<input type="text" value="333156.30"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="39000.00"/>	<input type="text" value="210047.34"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="123108.96"/>	<input type="text" value="123108.96"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	21927.46	85523.50
(ii) Unitemized	4003.38	75299.73
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	25930.84	160823.23
(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)	25930.84	160823.23
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.).....	18.05	105.95
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	25948.89	160929.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	25948.89	160929.18

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	39000.00	148500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	15.00
(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	15.00
29. Other Disbursements	0.00	61532.34
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	39000.00	210047.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39000.00	210047.34

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	25930.84	160823.23
34. Total Contribution Refunds (from Line 28(d))	0.00	15.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25930.84	160808.23
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 117
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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 AKA Cardinal Health Companies PAC

A. Ola M Snow
Full Name (Last, First, Middle Initial)
Mailing Address 267 Donerail Ave
City Powell State OH Zip Code 43065
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation SVP, HR Bus Partner Medical
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **650.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR100553417811
Amount of Each Receipt this Period **100.00**
P/R Deduction (\$50.00 Bi-Weekly)

B. Rosemary Pitts
Full Name (Last, First, Middle Initial)
Mailing Address 8673 Finlarig Dr.
City Dublin State OH Zip Code 43017
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Strategic Plng/Execution
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR118725317811
Amount of Each Receipt this Period **76.00**
P/R Deduction (\$38.00 Bi-Weekly)

C. Ronald J Clerico
Full Name (Last, First, Middle Initial)
Mailing Address 485 Trillium Drive
City Galloway State OH Zip Code 43119
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Marketing Mgmt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR118725417811
Amount of Each Receipt this Period **38.00**
P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **214.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Mary L Hamlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 308 Ashley Ct
 City Washington State MO Zip Code 63090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Territory Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR120659517811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Katherine Ballay
 Full Name (Last, First, Middle Initial)
 Mailing Address 7531 Bardston Drive
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Comm Business Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR120659617811
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$20.00 Bi-Weekly)

C. Kevin Williamson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3155 Victoria Drive
 City Alpine State CA Zip Code 91901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Exec, Territory Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR120659817811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	116.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. William C Putnam
 Full Name (Last, First, Middle Initial)
 Mailing Address 7812 W. 147th Terrace
 City Overland Park State KS Zip Code 66223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Scientific Consulting
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR120659917811
 Amount of Each Receipt this Period **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

B. FRANCISCO J NEGRON SEGARRA
 Full Name (Last, First, Middle Initial)
 Mailing Address CALLE 4, E-13 URB. VILLA MERCEDEZ
 City GUAYNABO State PR Zip Code 00971-9314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation DIR, OPERATIONS MGMT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR120660017811
 Amount of Each Receipt this Period **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

C. Lori J Roepken
 Full Name (Last, First, Middle Initial)
 Mailing Address 1402 Wheeler Dr
 City Mansfield State TX Zip Code 76063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Clinical Ops Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR120669717811
 Amount of Each Receipt this Period **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	152.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Therese Grossi
 Full Name (Last, First, Middle Initial)
 Mailing Address 17211 Willow Rdge CT
 City Northville State MI Zip Code 48168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, Enterprise Contracting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 06 / 30 / 2015
Transaction ID : PR120669817811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Timothy W House
 Full Name (Last, First, Middle Initial)
 Mailing Address 5920 Gainey Court
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Account Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 06 / 30 / 2015
Transaction ID : PR120669917811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. Tiffany P Olson
 Full Name (Last, First, Middle Initial)
 Mailing Address 15402 Hidden Oaks Lane
 City Carmel State IN Zip Code 46033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation President, Nuclear Pharmacy Serv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2499.90

Date of Receipt
 06 / 30 / 2015
Transaction ID : PR120670117811
 Amount of Each Receipt this Period 384.60
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 460.60
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Brandon W Quindt
 Full Name (Last, First, Middle Initial)
 Mailing Address 10661 South 204th St
 City Gretna State NE Zip Code 68028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Operations Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR120701117811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Guru Gurushankar
 Full Name (Last, First, Middle Initial)
 Mailing Address 6188 Memorial Drive
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR120701217811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. David M Mitchell
 Full Name (Last, First, Middle Initial)
 Mailing Address 222 West 14th Street 4B
 City New York State NY Zip Code 10011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Marketing Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR122644917811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	152.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Reginald Thevenot
Full Name (Last, First, Middle Initial)
Mailing Address 3 Dustin Court
City Mansfield State MA Zip Code 02048
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation Dir, Operations Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR122694717811
Amount of Each Receipt this Period 38.00
P/R Deduction (\$19.00 Bi-Weekly)

B. Richard G Fullenkamp
Full Name (Last, First, Middle Initial)
Mailing Address 8975 Portofino Place
City Dublin State OH Zip Code 43016
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation Dir, Regulatory Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR122694817811
Amount of Each Receipt this Period 38.00
P/R Deduction (\$19.00 Bi-Weekly)

C. Dennis W Sevin
Full Name (Last, First, Middle Initial)
Mailing Address 1342 White Oak Ct.
City North Huntingdon State PA Zip Code 15642
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation Director, EH&S
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR122779717811
Amount of Each Receipt this Period 38.00
P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 114.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Stephen S Norris
Full Name (Last, First, Middle Initial)
Mailing Address 207 King Ct
City Bullard State TX Zip Code 75757
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation Dir, Manufacturing Mgmt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR122779917811
Amount of Each Receipt this Period **38.00**
P/R Deduction (\$19.00 Bi-Weekly)

B. Garvin P Prescod
Full Name (Last, First, Middle Initial)
Mailing Address 101 Braebank Ln
City Bryn Mawr State PA Zip Code 19010
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation Director, EH&S
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR122787617811
Amount of Each Receipt this Period **38.00**
P/R Deduction (\$19.00 Bi-Weekly)

C. Jennifer R Ferrang
Full Name (Last, First, Middle Initial)
Mailing Address Cardinal Health
100 Raritan Center Parkway
City Lebanon State NJ Zip Code 08833
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Direct Sales Mgmt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR122787717811
Amount of Each Receipt this Period **76.00**
P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **152.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Thomas C Novelli
 Full Name (Last, First, Middle Initial)
 Mailing Address 6486 Sutcliffe Drive
 City Alexandria State VA Zip Code 22315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR122840617811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. Scott J Wagner
 Full Name (Last, First, Middle Initial)
 Mailing Address 7504 Breezy Lake Lane
 City Flowery Branch State GA Zip Code 30542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Transportation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR124937417811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

C. Jeffrey J Easterling
 Full Name (Last, First, Middle Initial)
 Mailing Address 965 Wessington Manor Lane
 City Fort Mill State SC Zip Code 29715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, GM Cust Analytics Solutions
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR124937517811
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	212.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Theron B Neese
Full Name (Last, First, Middle Initial)
Mailing Address 4855 Spring Park Cir
City Suwanne State GA Zip Code 30024
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Account Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 494.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR124937617811
Amount of Each Receipt this Period 76.00
P/R Deduction (\$38.00 Bi-Weekly)

B. Martin L Newman
Full Name (Last, First, Middle Initial)
Mailing Address 3762 Quail Hollow
City Celina State TX Zip Code 75009
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Account (Government)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR124937717811
Amount of Each Receipt this Period 38.00
P/R Deduction (\$19.00 Bi-Weekly)

C. Michael A Gates
Full Name (Last, First, Middle Initial)
Mailing Address 1212 Brionne Court
City Waxhaw State NC Zip Code 28173
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Operations Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR124937817811
Amount of Each Receipt this Period 40.00
P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 154.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 117
	<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 AKA Cardinal Health Companies PAC

A. Ryan K Cox
Full Name (Last, First, Middle Initial)
Mailing Address 639 NW Fremont St
City Camas State WA Zip Code 98607
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Territory Sales (Lab)
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124937917811
Amount of Each Receipt this Period **76.00**
P/R Deduction (\$38.00 Bi-Weekly)

B. Stephen M Mason
Full Name (Last, First, Middle Initial)
Mailing Address 347 Oakland Beach Ave.
City Rye State NY Zip Code 10580
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation SVP, GM Kinray
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124938017811
Amount of Each Receipt this Period **38.00**
P/R Deduction (\$19.00 Bi-Weekly)

c. Robert D Wagner
Full Name (Last, First, Middle Initial)
Mailing Address 8844 Tartan Fields Drive
City Dublin State OH Zip Code 43017
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Strategic Sourcing
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124938117811
Amount of Each Receipt this Period **76.00**
P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 117
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Nancy Hula-Mills
Full Name (Last, First, Middle Initial)
Mailing Address 8581 The Island
City Memphis State TN Zip Code 38125
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Sales (Enterprise Contractin
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 494.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR124938417811
Amount of Each Receipt this Period 76.00
P/R Deduction (\$38.00 Bi-Weekly)

B. Luis E Garcia
Full Name (Last, First, Middle Initial)
Mailing Address 5263 SW 152 Avenue
City Miramar State FL Zip Code 33027
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Nuclear Pharmacy
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 494.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR124938517811
Amount of Each Receipt this Period 76.00
P/R Deduction (\$38.00 Bi-Weekly)

C. Daniel C Stelter
Full Name (Last, First, Middle Initial)
Mailing Address 130 N GARLAND CT APT 4902
City Chicago State IL Zip Code 60602
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Intell Property (Atty)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 494.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR124938617811
Amount of Each Receipt this Period 76.00
P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 117
<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 AKA Cardinal Health Companies PAC

A. Kevin Taylor
 Full Name (Last, First, Middle Initial)
 Mailing Address 1835 Glenn Avenue
 City State Zip Code
 Upper Arlington OH 43212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124938817811
 Amount of Each Receipt this Period
 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. Max J Friedauer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1554 Heatherwae Loop
 City State Zip Code
 Powell OH 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Strategic Pricing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124938917811
 Amount of Each Receipt this Period
 40.00
 P/R Deduction (\$20.00 Bi-Weekly)

C. David T Zimpfer
 Full Name (Last, First, Middle Initial)
 Mailing Address 6916 Corazon Drive
 City State Zip Code
 Dublin OH 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Info Services & Analytics
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124939017811
 Amount of Each Receipt this Period
 40.00
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	156.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Ronald A Schultz		Date of Receipt MM / DD / YYYY 06 / 30 / 2015
Mailing Address 1209 East Cork Street		Transaction ID : PR124939117811
City Kalamazoo	State MI	Zip Code 49001
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100.00
Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Quality Assurance	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. Helene U Godat		Date of Receipt MM / DD / YYYY 06 / 30 / 2015
Mailing Address 3601 Harvard Ave		Transaction ID : PR124939317811
City Highland Park	State TX	Zip Code 75205
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
Name of Employer CARDINAL HEALTH, INC	Occupation VP, Product or Services Mktg	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) C. Cynthia M Davidson		Date of Receipt MM / DD / YYYY 06 / 30 / 2015
Mailing Address 1350 N. Western Ave #103		Transaction ID : PR124983717811
City Lake Forest	State IL	Zip Code 60045
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 76.00
Name of Employer CARDINAL HEALTH, INC	Occupation VP, Sales Operations Mgmt	P/R Deduction (\$38.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00	

SUBTOTAL of Receipts This Page (optional).....▶	226.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Steven B Sanford
 Full Name (Last, First, Middle Initial)
 Mailing Address 905 CR 3131
 City Jacksonville State TX Zip Code 75766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Manufacturing Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124983817811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Stacy A Butterfield
 Full Name (Last, First, Middle Initial)
 Mailing Address 5151 Woodbridge Dr
 City Powell State OH Zip Code 43065
 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 ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124984217811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. Thomas E Burke
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 Parsons Drive
 City Swampscott State MA Zip Code 01907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP/GM Innovative Delivery Solut
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124984317811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	152.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. John W Kilgour
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 764
 43 Fellows Rd.
 City Ipswich State MA Zip Code 01938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Direct Sales Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124984417811
 Amount of Each Receipt this Period **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

B. Benjamin E Stormer
 Full Name (Last, First, Middle Initial)
 Mailing Address 498 Greenglade Avenue
 City Worthington State OH Zip Code 43085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Technical Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124984517811
 Amount of Each Receipt this Period **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

C. Mark S Mitchell
 Full Name (Last, First, Middle Initial)
 Mailing Address 76 Tranquil Trail
 City Dunlap State TN Zip Code 37327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Territory Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124984617811
 Amount of Each Receipt this Period **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Teresa A Stentz
 Full Name (Last, First, Middle Initial)
 Mailing Address 2249 Sheringham Road
 City State Zip Code
 Upper Arlington OH 43220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Inventory Mgmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124984917811
 Amount of Each Receipt this Period
 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. Cynthia L Adkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 8374 Daventry Court
 City State Zip Code
 Powell OH 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC Dir, Strategic Plng/Execution
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124985117811
 Amount of Each Receipt this Period
 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. Brent E Stutz
 Full Name (Last, First, Middle Initial)
 Mailing Address 8176 Crossgate Court N
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC SVP, Commercial Technologies
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124985217811
 Amount of Each Receipt this Period
 100.00
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	214.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. James E Barnett
 Full Name (Last, First, Middle Initial)
 Mailing Address 7657 Kestrel Way W
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Asc Gen Csl, Corp/Secur
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124985317811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. Jeffrey R Bennett
 Full Name (Last, First, Middle Initial)
 Mailing Address 2266 Dauer Court
 City State Zip Code
 Powell OH 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC SVP, General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124985417811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. Aaron R Lewis
 Full Name (Last, First, Middle Initial)
 Mailing Address 175 Coachman Dr
 City State Zip Code
 Plain City OH 43064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC Dir, Compliance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124985617811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	152.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. John M Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 3800 Beecham Ct.
 City Columbus State OH Zip Code 43220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, Associate General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **650.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124985917811
 Amount of Each Receipt this Period **100.00**
 P/R Deduction (\$50.00 Bi-Weekly)

B. William Rozich
 Full Name (Last, First, Middle Initial)
 Mailing Address 9926 MacDonald Drive
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, HR Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124986017811
 Amount of Each Receipt this Period **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

C. Stephanie R Revish
 Full Name (Last, First, Middle Initial)
 Mailing Address 4304 Hickory Rock Dr
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Fin Plng & Analysis
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124986117811
 Amount of Each Receipt this Period **40.00**
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	216.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Frederick P Jenny
 Full Name (Last, First, Middle Initial)
 Mailing Address 5013 straits link
 City New Albany State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Software Engineering
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124986317811
 Amount of Each Receipt this Period **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

B. Peter M Hoelt
 Full Name (Last, First, Middle Initial)
 Mailing Address 7000 Cardinal Place
 City Galena State OH Zip Code 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Sr Proj Mgr, Bus Integration
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **325.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124986417811
 Amount of Each Receipt this Period **50.00**
 P/R Deduction (\$25.00 Bi-Weekly)

C. Eric Myers
 Full Name (Last, First, Middle Initial)
 Mailing Address 8410 Russett Ct
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Asc Gen Csl, Labor/Employ
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124986517811
 Amount of Each Receipt this Period **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	202.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 117
	<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 AKA Cardinal Health Companies PAC

A. Joseph M O'Sullivan
 Full Name (Last, First, Middle Initial)
 Mailing Address 59 Cedar Drive
 City Massapequa State NY Zip Code 11758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Credit
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124987117811
 Amount of Each Receipt this Period **40.00**
 P/R Deduction (\$20.00 Bi-Weekly)

B. Thomas M Pelizza
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 Sassinoro Drive
 City Putnam Valley State NY Zip Code 10579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Territory Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124987217811
 Amount of Each Receipt this Period **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

C. Michael J Rothstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 Todd Ct
 City Huntington Station State NY Zip Code 11746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Territory Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124987317811
 Amount of Each Receipt this Period **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **192.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Christopher G Lindroth
 Full Name (Last, First, Middle Initial)
 Mailing Address 91 Prescott Dr
 City Hudson State OH Zip Code 44236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, GM Edgepark
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR124987517811
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$50.00 Bi-Weekly)

B. Kurt R Packer
 Full Name (Last, First, Middle Initial)
 Mailing Address 86 Brandywine Dr
 City Hudson State OH Zip Code 44236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, GM CAH at Home
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR124987617811
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$50.00 Bi-Weekly)

C. Michael B Petras
 Full Name (Last, First, Middle Initial)
 Mailing Address 3591 West Galloway
 City Richfield State OH Zip Code 44286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Pres, GM CAH at Home
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR124987817811
 Amount of Each Receipt this Period 200.00
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Kevin E Gehrt
 Full Name (Last, First, Middle Initial)
 Mailing Address 7439 Merion Ct
 City Solon State OH Zip Code 44139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, HR Business Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124988017811
 Amount of Each Receipt this Period **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

B. Andrew L Hinkle
 Full Name (Last, First, Middle Initial)
 Mailing Address 321 Simon Rd
 City Hudson State OH Zip Code 44236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Contract and Billing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124988117811
 Amount of Each Receipt this Period **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

C. Steven A Eisenberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 35590 Michael Dr
 City Solon State OH Zip Code 44139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Comm/Trans (Atty)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **469.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR124988217811
 Amount of Each Receipt this Period **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Paul R Gotti
 Full Name (Last, First, Middle Initial)
 Mailing Address 9960 Concord Rd
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Nuclear Pharmacy
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124988417811
 Amount of Each Receipt this Period
 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. Eileen Lehmann
 Full Name (Last, First, Middle Initial)
 Mailing Address 8585 Pennington Ct
 City State Zip Code
 Powell OH 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC Dir, Internal Communications
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124989017811
 Amount of Each Receipt this Period
 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. MARIBEL L DELFAUS ROSARIO
 Full Name (Last, First, Middle Initial)
 Mailing Address PMB 101
 405 AVE ESMERALDA STE 102
 City State Zip Code
 GUAYNABO PR 00969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, HR BUSINESS PART
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124989217811
 Amount of Each Receipt this Period
 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Thomas D Dardis		Date of Receipt MM / DD / YYYY 06 / 30 / 2015
Mailing Address 4023 James River Road		Transaction ID : PR124989417811
City New Albany	State OH	Zip Code 43054
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer CARDINAL HEALTH, INC	Occupation VP, Operations Mgmt	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Rebecca A Hellmann		Date of Receipt MM / DD / YYYY 06 / 30 / 2015
Mailing Address 1717 Doone Rd		Transaction ID : PR124989817811
City Columbus	State OH	Zip Code 43221
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.00	
Name of Employer CARDINAL HEALTH, INC	Occupation VP, Marketing Mgmt	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	

Full Name (Last, First, Middle Initial) C. Jeffrey W Lovesy		Date of Receipt MM / DD / YYYY 06 / 30 / 2015
Mailing Address 720 W. Diana		Transaction ID : PR124989917811
City Phoenix	State AZ	Zip Code 85021
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer CARDINAL HEALTH, INC	Occupation VP, Direct Sales Mgmt	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional).....▶	138.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 30 OF 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Steven H Cohen
 Full Name (Last, First, Middle Initial)
 Mailing Address 2945 Surrey Lane
 City Weston State FL Zip Code 33331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Sales
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124990117811
 Amount of Each Receipt this Period
 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. JoAnna M Shore
 Full Name (Last, First, Middle Initial)
 Mailing Address 6570 Wooded View Dr.
 City Hudson State OH Zip Code 44236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Direct Sales Mgmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 526.62

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR124990317811
 Amount of Each Receipt this Period
 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

C. Marino Colatruglio
 Full Name (Last, First, Middle Initial)
 Mailing Address 4500 Clark Shaw Rd
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Facilities & RE Mgmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR125269317811
 Amount of Each Receipt this Period
 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Mark F Stauffer
 Full Name (Last, First, Middle Initial)
 Mailing Address 7000 Cardinal Place
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Tax
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 456.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR125269417811
 Amount of Each Receipt this Period
 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. William J Taylor
 Full Name (Last, First, Middle Initial)
 Mailing Address 770 HeartlandMeadows
 City State Zip Code
 Sunbury OH 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC Mgr, Marketing Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR125269517811
 Amount of Each Receipt this Period
 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. Vernon E Elliott
 Full Name (Last, First, Middle Initial)
 Mailing Address 414 Mill Wood Blvd.
 City State Zip Code
 Marysville OH 43040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC Sr Engr, IT Client Sys Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR125269717811
 Amount of Each Receipt this Period
 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	152.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Melanie C Filas
Full Name (Last, First, Middle Initial)
Mailing Address 1409 Riverwood Lane
City Powell State OH Zip Code 43065
FEC ID number of contributing federal political committee. **C**
Name of Employer: CARDINAL HEALTH, INC Occupation: VP, Compensation
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **325.00**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR125270017811
Amount of Each Receipt this Period: 50.00
P/R Deduction (\$25.00 Bi-Weekly)

B. Richard D Kirkland
Full Name (Last, First, Middle Initial)
Mailing Address 571 Birch Street
City Westerville State OH Zip Code 43082
FEC ID number of contributing federal political committee. **C**
Name of Employer: CARDINAL HEALTH, INC Occupation: Dir, Talent Mgmt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **247.00**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR125270217811
Amount of Each Receipt this Period: 38.00
P/R Deduction (\$19.00 Bi-Weekly)

C. Edward Daniels
Full Name (Last, First, Middle Initial)
Mailing Address 3832 Dennis Rd
City New Holland State OH Zip Code 43145
FEC ID number of contributing federal political committee. **C**
Name of Employer: CARDINAL HEALTH, INC Occupation: VP, Ethics and Compliance
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **247.00**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR129786817811
Amount of Each Receipt this Period: 38.00
P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **126.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Kristin R Harper
 Full Name (Last, First, Middle Initial)
 Mailing Address 5732 Rocky Shore Drive
 City Lewis Center State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Marketing Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR129786917811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. Steven Briggs
 Full Name (Last, First, Middle Initial)
 Mailing Address 10070 Brookfield Dr.
 City Concord State OH Zip Code 44060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, GM Category Mgmt CAH at Home
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR129787017811
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$25.00 Bi-Weekly)

C. Michael C Kuo
 Full Name (Last, First, Middle Initial)
 Mailing Address 1810 Ravenel Lane
 City Sugar Land State TX Zip Code 77479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Pharmacy Operations Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR130000017811
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 176.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 34 OF 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Rosario J Lazzaro
 Full Name (Last, First, Middle Initial)
 Mailing Address 74 South Street
 City State Zip Code
 Cresskill NJ 07626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC Director, Pharmacy
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR130084617811
 Amount of Each Receipt this Period
 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Jorge M Gomez
 Full Name (Last, First, Middle Initial)
 Mailing Address 8028 Holyrood Court
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC SVP, Finance
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR130358217811
 Amount of Each Receipt this Period
 40.00
 P/R Deduction (\$20.00 Bi-Weekly)

C. John P Sullivan
 Full Name (Last, First, Middle Initial)
 Mailing Address 7101 Robertson Court
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Strategy Mgmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR130358317811
 Amount of Each Receipt this Period
 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 116.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Eli G Phillips			Date of Receipt MM / DD / YYYY 06 / 30 / 2015
Mailing Address 4895 Vicksburg Ln			Transaction ID : PR130358417811
City Hilliard	State OH	Zip Code 43026	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$25.00 Bi-Weekly)	
Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Regulatory Mgmt	Aggregate Year-to-Date 325.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Kathyne G Reeves			Date of Receipt MM / DD / YYYY 06 / 30 / 2015
Mailing Address 3933 Farber Court			Transaction ID : PR130720017811
City New Albany	State OH	Zip Code 43054	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Bi-Weekly)	
Name of Employer CARDINAL HEALTH, INC	Occupation SVP, Enterprise Marketing	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Phyllis J Jarrett			Date of Receipt MM / DD / YYYY 06 / 30 / 2015
Mailing Address 30 Cape Cod			Transaction ID : PR130810917811
City Irvine	State CA	Zip Code 92620	Amount of Each Receipt this Period 76.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$38.00 Bi-Weekly)	
Name of Employer CARDINAL HEALTH, INC	Occupation VP, Direct Sales Mgmt	Aggregate Year-to-Date 266.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	226.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Mark A Contardo
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Cardinal Drive
 City Franklin State MA Zip Code 02038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Direct Sales Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR130811217811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. Tracy Howard
 Full Name (Last, First, Middle Initial)
 Mailing Address 6464 Greenstone Loop
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Strategic PIng/Execution
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR130811917811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

C. Lori G Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 6909 New Albany Links Drive
 City New Albany State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Strategic PIng/Execution
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR130812017811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

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

FOR LINE NUMBER: PAGE 37 OF 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Tina G Lantz
 Full Name (Last, First, Middle Initial)
 Mailing Address 307 E Beck St
 City Columbus State OH Zip Code 43206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Sales Operations Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR130812417811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. Robert E Schlisberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 7816 Alexandra Dr
 City Hudson State OH Zip Code 44236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Territory Sales CAH at Home
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR130812917811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

C. Michael J Glending
 Full Name (Last, First, Middle Initial)
 Mailing Address 36422 Gosford Dr
 City Avon State OH Zip Code 44011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Territory Sales CAH at Home
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR130813217811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Ryan D Schorr
Full Name (Last, First, Middle Initial)
Mailing Address 243 Stone Canyon Ct
City Hinckley State OH Zip Code 44233
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Account Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 266.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR130813317811
Amount of Each Receipt this Period 76.00
P/R Deduction (\$38.00 Bi-Weekly)

B. John D Crowley
Full Name (Last, First, Middle Initial)
Mailing Address 2523 Titans Lane
City Brentwood State TN Zip Code 37027
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Sales Operations Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 266.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR130814817811
Amount of Each Receipt this Period 76.00
P/R Deduction (\$38.00 Bi-Weekly)

c. Steven D Light
Full Name (Last, First, Middle Initial)
Mailing Address 4249 Vaux Link
City New Albany State OH Zip Code 43054
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Product or Services Mktg
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 266.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR130814917811
Amount of Each Receipt this Period 76.00
P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Russell M Williamson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5009 Glenshire Drive
 City Flower Mound State TX Zip Code 75028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, GM Enterprise Corporate Acco
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **350.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR130815217811
 Amount of Each Receipt this Period **100.00**
 P/R Deduction (\$50.00 Bi-Weekly)

B. William G Wiley
 Full Name (Last, First, Middle Initial)
 Mailing Address 3063 Pecan Grove Lane
 City Prosper State TX Zip Code 75078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Operations Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **266.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR130815517811
 Amount of Each Receipt this Period **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

C. Rhonda D Hoffman
 Full Name (Last, First, Middle Initial)
 Mailing Address 303 Coal Bend
 City Delaware State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, GM Retail
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **350.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR130815617811
 Amount of Each Receipt this Period **100.00**
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	276.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)
A. Michael F PinteK

Mailing Address 4510 W. Rapid Springs.

City Austin	State TX	Zip Code 78746
----------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation VP, Account Mgmt
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
266.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR130815717811

Amount of Each Receipt this Period
76.00

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

Full Name (Last, First, Middle Initial)
B. Frank Cracolici

Mailing Address 571 Aguajito Road

City Carmel	State CA	Zip Code 93923
----------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation VP, GM Enterprise Corporate Acco
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
266.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR130815917811

Amount of Each Receipt this Period
76.00

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

Full Name (Last, First, Middle Initial)
C. Jan E Nielsen

Mailing Address 4408 Pecan Bend

City Parker	State TX	Zip Code 75002
----------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation VP, Product or Services Mktg
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR130839917811

Amount of Each Receipt this Period
76.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Mark L Lieberman
Full Name (Last, First, Middle Initial)

Mailing Address 11 Cherry Hill Lane

City Manalapan State NJ Zip Code 07726

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, Direct Sales Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **332.00**

Date of Receipt **06 / 30 / 2015**

Transaction ID : PR130967917811

Amount of Each Receipt this Period **40.00**

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

B. Heather M O'Sullivan
Full Name (Last, First, Middle Initial)

Mailing Address 94 Kettle Hole Road

City Bolton State MA Zip Code 01740

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

Name of Employer CARDINAL HEALTH, INC Occupation VP, Clinical Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **266.00**

Date of Receipt **06 / 30 / 2015**

Transaction ID : PR130968017811

Amount of Each Receipt this Period **76.00**

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

C. Paul R Leodler
Full Name (Last, First, Middle Initial)

Mailing Address Varies By Worker

City Silverdale State WA Zip Code 98383

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

Name of Employer CARDINAL HEALTH, INC Occupation Director, Security

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt **06 / 30 / 2015**

Transaction ID : PR78006117811

Amount of Each Receipt this Period **38.00**

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

SUBTOTAL of Receipts This Page (optional)..... **154.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 42 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Robert F Glover
 Full Name (Last, First, Middle Initial)
 Mailing Address 5633 N Kostner Avenue
 City Chicago State IL Zip Code 60646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Account (Enterprise Contrac
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR87377417811
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$25.00 Bi-Weekly)

B. Mark R Overman
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 Wyndham Hill Ct
 City Southlake State TX Zip Code 76092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Account (Enterprise Contract
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 587.60

Date of Receipt 06 / 30 / 2015
Transaction ID : PR87377717811
 Amount of Each Receipt this Period 90.40
 P/R Deduction (\$45.20 Bi-Weekly)

C. Linda S Lockyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1133 Noe Street
 City San Francisco State CA Zip Code 94114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Account (Enterprise Contrac
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR87377817811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	216.40
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 43 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Christopher D Kerski
 Full Name (Last, First, Middle Initial)
 Mailing Address 8155 Campden Lakes Boulevard
 City State Zip Code
 Dublin OH 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC SVP, GM Laboratory Products
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87378617811
 Amount of Each Receipt this Period 80.00
 P/R Deduction (\$40.00 Bi-Weekly)

B. Mark T Henderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 11300 Glenwood Street
 City State Zip Code
 Shawnee KS 66226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Direct Sales Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87378717811
 Amount of Each Receipt this Period 37.08
 P/R Deduction (\$18.54 Bi-Weekly)

C. Kathy S Popejoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 11127 W 59th Ave
 City State Zip Code
 Arvada CO 80004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC Dir, Operations Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.05

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87379417811
 Amount of Each Receipt this Period 53.70
 P/R Deduction (\$26.85 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	170.78
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Christopher J Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3600 George Pierce
 City Suwanee State GA Zip Code 30024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC Dir, QRA Mgmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87379917811
 Amount of Each Receipt this Period
 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Douglas J Katz
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 McCue Rd
 City Morganville State NJ Zip Code 07751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Direct Sales Mgmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87380217811
 Amount of Each Receipt this Period
 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. James A Whidden
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Cherry Lane
 City Chester State NY Zip Code 10918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC Dir, Regulatory Mgmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87381017811
 Amount of Each Receipt this Period
 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	▶	114.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Robert M Randklev		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87381117811
Mailing Address 4708 Meandering Way		Amount of Each Receipt this Period 40.00
City Colleyville	State TX	Zip Code 76034
FEC ID number of contributing federal political committee.	C	
Name of Employer CARDINAL HEALTH, INC	Occupation SVP, HSS Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Geoffrey Y McMahon		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87381217811
Mailing Address 57-531 Kamehameha Hwy		Amount of Each Receipt this Period 38.00
City Kahuku	State HI	Zip Code 96731
FEC ID number of contributing federal political committee.	C	
Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Operations Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Benjamin T Thompson		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87381417811
Mailing Address 2029 Lewis Crossing Court		Amount of Each Receipt this Period 76.00
City Keller	State TX	Zip Code 76248
FEC ID number of contributing federal political committee.	C	
Name of Employer CARDINAL HEALTH, INC	Occupation VP, Direct Sales Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00	P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	154.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Laurel Beeler		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87382017811
Mailing Address 1723 Eagle Trl		Amount of Each Receipt this Period 50.00
City Oxford	State MI	Zip Code 48371
FEC ID number of contributing federal political committee. C		P/R Deduction (\$25.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation Exec, Account	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. Daniel L Swanberg		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87382217811
Mailing Address 3648 Tierra Paris		Amount of Each Receipt this Period 38.00
City El Paso	State TX	Zip Code 79938
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Engineering Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	

Full Name (Last, First, Middle Initial) C. Michael L Groesbeck		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87382317811
Mailing Address 33916 N Summerfields Dr		Amount of Each Receipt this Period 80.00
City Gurnee	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C		P/R Deduction (\$40.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation SVP, QRA Medical	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

SUBTOTAL of Receipts This Page (optional).....▶	168.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 47 OF 117
<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 AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial) A. Debra L Schotz		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87382717811
Mailing Address 2351 Thornwood Avenue		Amount of Each Receipt this Period 100.00
City Wilmette	State IL	Zip Code 60091
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation SVP, GM Perioperative Products
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Gregg A Brewster		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87382817811
Mailing Address 3710 Fenceline Road		Amount of Each Receipt this Period 38.00
City Franksville	State WI	Zip Code 53126
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation VP, Account (Enterprise Contrac
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00	P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Greg W Storm		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87383417811
Mailing Address Varies By Worker		Amount of Each Receipt this Period 64.02
City Little Rock	State AR	Zip Code 72223
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation Exec, Sales
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.13	P/R Deduction (\$32.01 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	202.02
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Stephen A Inacker
 Full Name (Last, First, Middle Initial)
 Mailing Address 1471 Firwood Ct.
 City Marco Island State FL Zip Code 34145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Pres, Hospital Sales and Svcs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **521.43**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87383517811
 Amount of Each Receipt this Period **80.22**
 P/R Deduction (\$40.11 Bi-Weekly)

B. Wilfrido M Sosa
 Full Name (Last, First, Middle Initial)
 Mailing Address 721 Live Oak
 City El Paso State TX Zip Code 79932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, Manufacturing (Medical Prod)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87384117811
 Amount of Each Receipt this Period **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

C. Susan J Jacobson
 Full Name (Last, First, Middle Initial)
 Mailing Address 65 East Monroe #4606
 City Chicago State IL Zip Code 60603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87384517811
 Amount of Each Receipt this Period **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **194.22**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 215 N. Pine Street
Unit 3906

City Charlotte State NC Zip Code 28202

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

Name of Employer Occupation
CARDINAL HEALTH, INC Dir, Account Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt
06 / 30 / 2015

Transaction ID : PR87384617811

Amount of Each Receipt this Period
38.00

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

B. Evelyn Long
Full Name (Last, First, Middle Initial)

Mailing Address 3333 Hawks Ridge Dr

City Lakeland State FL Zip Code 33810

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

Name of Employer Occupation
CARDINAL HEALTH, INC Dir, Operations Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
06 / 30 / 2015

Transaction ID : PR87384817811

Amount of Each Receipt this Period
40.00

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

C. Kate C Spirko
Full Name (Last, First, Middle Initial)

Mailing Address 6812 Spruce Pine Dr

City Columbus State OH Zip Code 43235

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

Name of Employer Occupation
CARDINAL HEALTH, INC Dir, HR Service Center

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **494.00**

Date of Receipt
06 / 30 / 2015

Transaction ID : PR87385117811

Amount of Each Receipt this Period
76.00

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

SUBTOTAL of Receipts This Page (optional)..... **154.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Rachel R Stoll		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87385317811
Mailing Address 4228 St. Andrews Blvd		Amount of Each Receipt this Period 76.00
City Irving	State TX	Zip Code 75038
FEC ID number of contributing federal political committee. C		P/R Deduction (\$38.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation VP, Direct Sales Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00	

Full Name (Last, First, Middle Initial) B. Stacy Septer		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87385617811
Mailing Address 18 Miller Drive		Amount of Each Receipt this Period 38.00
City Sylacauga	State AL	Zip Code 35151
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Direct Sales Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	

Full Name (Last, First, Middle Initial) C. Paul S Pogue		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87386017811
Mailing Address 1174 Greers Landing Dr		Amount of Each Receipt this Period 38.00
City Hernando	State MS	Zip Code 38632
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Product or Services Mktg	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	

SUBTOTAL of Receipts This Page (optional).....▶	152.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 51 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Brenda G Barden		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87386117811
Mailing Address 3435 Alta Vista Dr		Amount of Each Receipt this Period 9.00
City Chattanooga	State TN	Zip Code 37411
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Account Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.00	

Full Name (Last, First, Middle Initial) B. Danny W Penny		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87386417811
Mailing Address 27 N Lake Ave		Amount of Each Receipt this Period 38.00
City Third Lake	State IL	Zip Code 60030
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Packaging Engr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	

Full Name (Last, First, Middle Initial) C. Mark Misplay		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87386617811
Mailing Address 4007 Chelsea Green East		Amount of Each Receipt this Period 38.00
City New Albany	State OH	Zip Code 43054
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation VP, Account Mgmt (Ambulatory)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Curtis L Wilens
 Full Name (Last, First, Middle Initial)
 Mailing Address 1347 Coventry Ln
 City Northbrook State IL Zip Code 60062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Market Research
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87386817811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Scott A Donnelly
 Full Name (Last, First, Middle Initial)
 Mailing Address 12659 Hickory Ridge Road
 City Plain City State OH Zip Code 43064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Marketing Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87387517811
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$20.00 Bi-Weekly)

C. Robert Moulton
 Full Name (Last, First, Middle Initial)
 Mailing Address 7017 Violet Veil
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Fin Plng & Analysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87387617811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	116.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 53 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Stephen Reardon
Full Name (Last, First, Middle Initial)
Mailing Address 9098 Mediterra Place
City Dublin State OH Zip Code 43016
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, QRA Mgmt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87387817811
Amount of Each Receipt this Period **40.00**
P/R Deduction (\$20.00 Bi-Weekly)

B. Paul G Farley
Full Name (Last, First, Middle Initial)
Mailing Address 52 Onondaga Rd
City Narragansett State RI Zip Code 02882
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Account
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87388017811
Amount of Each Receipt this Period **38.00**
P/R Deduction (\$19.00 Bi-Weekly)

C. Daniel Bishop
Full Name (Last, First, Middle Initial)
Mailing Address 9712 Persimmon Place
City Plain City State OH Zip Code 43064
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation Dir, Fin Plng & Analysis
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87388217811
Amount of Each Receipt this Period **38.00**
P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **116.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 54 OF 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Patrick J Eckhart

Mailing Address 2600 Deseret Dr

City State Zip Code
 Powell OH 43065

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

Name of Employer Occupation
 CARDINAL HEALTH, INC Dir, Sourcing Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR87388317811

Amount of Each Receipt this Period
38.00

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

Full Name (Last, First, Middle Initial)
B. Rene Bloch

Mailing Address 401 Spring Drive

City State Zip Code
 Yorktown Heights NY 10598

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

Name of Employer Occupation
 CARDINAL HEALTH, INC Exec, Territory Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **494.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR87388417811

Amount of Each Receipt this Period
76.00

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

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

Mailing Address 10472 Mackenzie Way

City State Zip Code
 Dublin OH 43017

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

Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Software Engineering

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **494.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR87388517811

Amount of Each Receipt this Period
76.00

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

SUBTOTAL of Receipts This Page (optional)..... ▶ **190.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 OF 117
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. John A Fiacco			Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87388617811
Mailing Address 124 Fox Haven Drive			Amount of Each Receipt this Period 76.00
City O'Fallon	State MO	Zip Code 63368	P/R Deduction (\$38.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Occupation VP, Pharm Ops Mgmt - Med Shop	
Name of Employer CARDINAL HEALTH, INC	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 494.00

Full Name (Last, First, Middle Initial) B. Michael D Synor			Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87388817811
Mailing Address 31772 Fairway Dr N			Amount of Each Receipt this Period 38.00
City Foristell	State MO	Zip Code 63348	P/R Deduction (\$19.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Occupation Dir, Territory Sales	
Name of Employer CARDINAL HEALTH, INC	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 247.00

Full Name (Last, First, Middle Initial) C. Eric D Sutherland			Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87389017811
Mailing Address 6433 Tulipwood Lane			Amount of Each Receipt this Period 38.00
City Jamesville	State NY	Zip Code 13078	P/R Deduction (\$19.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Occupation Dir, Operations Mgmt	
Name of Employer CARDINAL HEALTH, INC	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 247.00

SUBTOTAL of Receipts This Page (optional).....▶	152.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Kristina M Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5464 Heathrow Drive
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: CARDINAL HEALTH, INC Occupation: VP, Software Engineering
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **209.95**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87389117811
 Amount of Each Receipt this Period: **32.30**
 P/R Deduction (\$16.15 Bi-Weekly)

B. Andre D Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 1327 Lake Grayson Drive
 City Katy State TX Zip Code 77494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: CARDINAL HEALTH, INC Occupation: Dir, Pharm Ops & Account Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87389317811
 Amount of Each Receipt this Period: **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

C. Ted L DiBiase
 Full Name (Last, First, Middle Initial)
 Mailing Address 4954 Rosegate Court
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: CARDINAL HEALTH, INC Occupation: VP, Org Health & Lab Rel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **795.60**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87389417811
 Amount of Each Receipt this Period: **122.40**
 P/R Deduction (\$61.20 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	192.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 57 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Joshua T Gaines
Full Name (Last, First, Middle Initial)
Mailing Address 2629 Bexley Park Road
City Bexley State OH Zip Code 43209
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation SVP, Strategy & Corp Devel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR87389617811
Amount of Each Receipt this Period 100.00
P/R Deduction (\$50.00 Bi-Weekly)

B. Stephen Flannery
Full Name (Last, First, Middle Initial)
Mailing Address 275 East Center St
City Shavertown State PA Zip Code 18708
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Account (Government)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 287.69

Date of Receipt 06 / 30 / 2015
Transaction ID : PR87389817811
Amount of Each Receipt this Period 44.26
P/R Deduction (\$22.13 Bi-Weekly)

C. Charles Aquilina
Full Name (Last, First, Middle Initial)
Mailing Address 4871 Normandy Drive
City Galena State OH Zip Code 43021
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Product or Services Mktg
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR87389917811
Amount of Each Receipt this Period 38.00
P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	182.26
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 58 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Robert S Summers
Full Name (Last, First, Middle Initial)
Mailing Address 146 Chasely Circle
City Powell State OH Zip Code 43065
FEC ID number of contributing federal political committee. **C**
Name of Employer: CARDINAL HEALTH, INC Occupation: Dir, Product or Services Mktg
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **407.29**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87390517811
Amount of Each Receipt this Period: **62.66**
P/R Deduction (\$31.33 Bi-Weekly)

B. Natasha C Nicol
Full Name (Last, First, Middle Initial)
Mailing Address 35 Red Tail Hawk Loop
City Pawleys Island State SC Zip Code 29585
FEC ID number of contributing federal political committee. **C**
Name of Employer: CARDINAL HEALTH, INC Occupation: Dir, Clinical Spec - Pharm Sol
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **247.00**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87390617811
Amount of Each Receipt this Period: **38.00**
P/R Deduction (\$19.00 Bi-Weekly)

C. Sean M McCaffrey
Full Name (Last, First, Middle Initial)
Mailing Address 1020 Buck Run Rd
City Southpointe State PA Zip Code 15317
FEC ID number of contributing federal political committee. **C**
Name of Employer: CARDINAL HEALTH, INC Occupation: VP, Operations Mgmt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **494.00**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87390717811
Amount of Each Receipt this Period: **76.00**
P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	176.66
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Deborah E Wolin
 Full Name (Last, First, Middle Initial)
 Mailing Address 44 Lake Mist Drive
 City Sugar Land State TX Zip Code 77479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Asc Gen Csl, Comm/Trans
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87390817811
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$20.00 Bi-Weekly)

B. Steven J Callison
 Full Name (Last, First, Middle Initial)
 Mailing Address 1368 Lincoln Road
 City Columbus State OH Zip Code 43212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Software Engineering
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 258.83

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87390917811
 Amount of Each Receipt this Period 39.82
 P/R Deduction (\$19.91 Bi-Weekly)

C. Gary G Cacciatore
 Full Name (Last, First, Middle Initial)
 Mailing Address 1330 Enclave Parkway
 City Houston State TX Zip Code 77059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Asc Gen Csl, Regulatory
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 483.91

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87391917811
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	139.82
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Richard F Colley
 Full Name (Last, First, Middle Initial)
 Mailing Address 2903 21st Ave Ct Se
 City Puyallup State WA Zip Code 98372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: CARDINAL HEALTH, INC Occupation: Exec, Account
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87392017811
 Amount of Each Receipt this Period: **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

B. James L Scott
 Full Name (Last, First, Middle Initial)
 Mailing Address 9318 Pradolina Villa Drive
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: CARDINAL HEALTH, INC Occupation: SVP, National Markets
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **650.00**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87392217811
 Amount of Each Receipt this Period: **100.00**
 P/R Deduction (\$50.00 Bi-Weekly)

C. Bradley G Cochran
 Full Name (Last, First, Middle Initial)
 Mailing Address 2589 Aikin Circle S
 City Lewis Center State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: CARDINAL HEALTH, INC Occupation: VP, Account
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **494.00**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87392417811
 Amount of Each Receipt this Period: **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	214.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. William Owad
 Full Name (Last, First, Middle Initial)
 Mailing Address 7558 Heatherwood Ln
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC SVP, Operational Excellence
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1303.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87392517811
 Amount of Each Receipt this Period
 200.60
 P/R Deduction (\$100.30 Bi-Weekly)

B. Lisa A Stillings
 Full Name (Last, First, Middle Initial)
 Mailing Address 5833 Whitecraigs Ct
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC Dir, Fin Plng & Analysis
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87392917811
 Amount of Each Receipt this Period
 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. Jeffrey B Brannon
 Full Name (Last, First, Middle Initial)
 Mailing Address 3965 Clearlake Circl
 City State Zip Code
 Zanesville OH 43701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Account
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87393017811
 Amount of Each Receipt this Period
 50.00
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	288.60
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Craig P Cowman		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87393117811
Mailing Address 6851 Killilea Drive		Amount of Each Receipt this Period 100.00
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation EVP, Global Sourcing
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Lori S Havlovitz		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87393217811
Mailing Address 8969 Sunningdale Lane		Amount of Each Receipt this Period 38.00
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation VP, IT Mgmt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Tracy K Godfrey		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87393317811
Mailing Address 1491 Polaris Parkway # 175		Amount of Each Receipt this Period 38.00
City Columbus	State OH	Zip Code 43240
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Strategic Pricing
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	176.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 63 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Mark D Zawadzki		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87393417811
Mailing Address 5991 Kitchen Ct		Amount of Each Receipt this Period 40.00
City Hilliard	State OH	Zip Code 43026
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation VP, Fin Plng & Analysis
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Margaret M LaValle		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87393517811
Mailing Address 6810 Vineyard Haven Loop		Amount of Each Receipt this Period 100.00
City Dublin	State OH	Zip Code 43016
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation SVP, HR Services Integration
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) c. Joseph S Hodge		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87393617811
Mailing Address 2260 Gnarled Pine Drive		Amount of Each Receipt this Period 38.00
City Dublin	State OH	Zip Code 43016
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation Exec, Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00	P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	178.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 117		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

A. Michael C Kaufmann
 Full Name (Last, First, Middle Initial)
 Mailing Address 7160 Temperance Point St
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: CARDINAL HEALTH, INC Occupation: Chief Financial Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2499.90**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87393817811
 Amount of Each Receipt this Period: **384.60**
 P/R Deduction (\$192.30 Bi-Weekly)

B. Gregory Boggs
 Full Name (Last, First, Middle Initial)
 Mailing Address 7746 Polo Lane
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: CARDINAL HEALTH, INC Occupation: VP, Software Engineering
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87393917811
 Amount of Each Receipt this Period: **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

C. Angela M Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 9287 Windy Creek Dr
 City Columbus State OH Zip Code 43240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: CARDINAL HEALTH, INC Occupation: VP, Field Service
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87394017811
 Amount of Each Receipt this Period: **40.00**
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	462.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 65 OF 117
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Laura L Smith			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2015 Transaction ID : PR87394617811		
Mailing Address 5828 Ivy Branch Dr			Amount of Each Receipt this Period 38.00		
City Dublin	State OH	Zip Code 43016	P/R Deduction (\$19.00 Bi-Weekly)		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 247.00			
Name of Employer CARDINAL HEALTH, INC		Occupation Dir, Sales Operations Mgmt			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name (Last, First, Middle Initial) B. Kevin M Kannally			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2015 Transaction ID : PR87394717811		
Mailing Address 14529 Robinson Rd			Amount of Each Receipt this Period 76.00		
City Plain City	State OH	Zip Code 43064	P/R Deduction (\$38.00 Bi-Weekly)		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 494.00			
Name of Employer CARDINAL HEALTH, INC		Occupation VP, Operations Mgmt			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name (Last, First, Middle Initial) C. Dana R Thacker			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2015 Transaction ID : PR87394817811		
Mailing Address 2934 Griffin Dr			Amount of Each Receipt this Period 38.00		
City Lewis Center	State OH	Zip Code 43035	P/R Deduction (\$19.00 Bi-Weekly)		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 247.00			
Name of Employer CARDINAL HEALTH, INC		Occupation Dir, Software Engineering			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional).....▶	152.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 66 OF 117
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. James P Combs
Full Name (Last, First, Middle Initial)
Mailing Address 69259 Lee Road
City St Clairsville State OH Zip Code 43950
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation Exec, Account
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 247.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015
Transaction ID : PR87394917811
Amount of Each Receipt this Period 38.00
P/R Deduction (\$19.00 Bi-Weekly)

B. Michael P Kennedy
Full Name (Last, First, Middle Initial)
Mailing Address 4783 Vista Ridge Dr
City Dublin State OH Zip Code 43017
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation SVP, Compliance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1303.90

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015
Transaction ID : PR87395017811
Amount of Each Receipt this Period 200.60
P/R Deduction (\$100.30 Bi-Weekly)

C. Carolyn E Grant
Full Name (Last, First, Middle Initial)
Mailing Address 6869 Meadow Glen Dr
City Westerville State OH Zip Code 43082
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation Dir, Government Relations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 494.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015
Transaction ID : PR87395417811
Amount of Each Receipt this Period 76.00
P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	314.60
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 67 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Kristina J Kallmeyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 275 Clearsprings Drive
 City Springboro State OH Zip Code 45066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Account (Enterprise Contrac
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87395517811
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$20.00 Bi-Weekly)

B. Troy L Hanson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5622 Dorsey Drive
 City Columbus State OH Zip Code 43235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 608.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87395817811
 Amount of Each Receipt this Period 93.64
 P/R Deduction (\$46.82 Bi-Weekly)

C. Patrick A Sells
 Full Name (Last, First, Middle Initial)
 Mailing Address 3460 Hyatts Rd
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, HR Business Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87396117811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	171.64
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 68 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Cassandra E Baker		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87396417811
Mailing Address 1751 Barrington Rd		Amount of Each Receipt this Period 139.02
City Upper Arlington	State OH	Zip Code 43221
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation VP, Government Relations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 903.63	P/R Deduction (\$69.51 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. James M Barker		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87396617811
Mailing Address 2761 Skelton Ln		Amount of Each Receipt this Period 73.12
City Blacklick	State OH	Zip Code 43004
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation VP, Strategic Sourcing
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.28	P/R Deduction (\$36.56 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Stephen T Falk		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87396817811
Mailing Address 2175 Lane Rd		Amount of Each Receipt this Period 200.00
City Columbus	State OH	Zip Code 43220
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation EVP & General Counsel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	412.14
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 69 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Carole S Watkins		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87397217811
Mailing Address 1967 Woodlands Place		Amount of Each Receipt this Period 384.60
City Powell State OH Zip Code 43065	FEC ID number of contributing federal political committee. C	P/R Deduction (\$192.30 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC Occupation Chief Human Resources Officer	Aggregate Year-to-Date 2499.90	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jon Giacomini		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87397417811
Mailing Address 6792 Ingalls Ct		Amount of Each Receipt this Period 150.00
City Galena State OH Zip Code 43021	FEC ID number of contributing federal political committee. C	P/R Deduction (\$75.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC Occupation CEO, Pharmaceutical Segment	Aggregate Year-to-Date 975.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Anne F McCluskey		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87397617811
Mailing Address 10910 E San Tan Blvd		Amount of Each Receipt this Period 38.00
City Sun Lakes State AZ Zip Code 85248	FEC ID number of contributing federal political committee. C	P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC Occupation Dir, Clinical Ops	Aggregate Year-to-Date 247.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	572.60
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 70 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Robert Giacalone			Date of Receipt
Mailing Address 7471 Balfoure Circle			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : PR87397817811
Dublin	OH	43017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="100.00"/>
Name of Employer	Occupation		P/R Deduction (\$50.00 Bi-Weekly)
CARDINAL HEALTH, INC	SVP, Reg Affairs/Chf Reg Cnsl		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
	<input type="text" value="650.00"/>		

Full Name (Last, First, Middle Initial) B. Debra A Fluno			Date of Receipt
Mailing Address 622 Sunnyside Ave			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : PR87398017811
Gurnee	IL	60031	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="38.00"/>
Name of Employer	Occupation		P/R Deduction (\$19.00 Bi-Weekly)
CARDINAL HEALTH, INC	Dir, Pharm Ops & Account Mgmt		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
	<input type="text" value="247.00"/>		

Full Name (Last, First, Middle Initial) C. Michael D Brown			Date of Receipt
Mailing Address 3103 Saddle Ridge			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : PR87398217811
Richmond	TX	77406	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="76.00"/>
Name of Employer	Occupation		P/R Deduction (\$38.00 Bi-Weekly)
CARDINAL HEALTH, INC	VP, Pharm Ops & Account Mgmt		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
	<input type="text" value="494.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="214.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Jacqueline A Gleason
 Full Name (Last, First, Middle Initial)
 Mailing Address N 7896 Valley View Rd
 City New Glarus State WI Zip Code 53574
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Program Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87398717811
 Amount of Each Receipt this Period **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

B. Anthony D Woo
 Full Name (Last, First, Middle Initial)
 Mailing Address 6151 Haddo Way
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, Corp Devel, Fin Anl/Val
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87398817811
 Amount of Each Receipt this Period **40.00**
 P/R Deduction (\$20.00 Bi-Weekly)

C. Kathryn J Ableidinger
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 Ashbury Ct
 City Hudson State WI Zip Code 54016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Operations Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87399017811
 Amount of Each Receipt this Period **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	154.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 72 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Daniel R Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 8124 Crooked Oaks Ct
 City Gainesville State VA Zip Code 20155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: CARDINAL HEALTH, INC Occupation: Dir, Pharm Ops & Account Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **494.00**

Date of Receipt: **06 / 30 / 2015**
Transaction ID : PR87399117811
 Amount of Each Receipt this Period: **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

B. Stephen M Lawrence
 Full Name (Last, First, Middle Initial)
 Mailing Address 4868 Carrigan Ridge
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: CARDINAL HEALTH, INC Occupation: SVP, Retail Independent Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1300.00**

Date of Receipt: **06 / 30 / 2015**
Transaction ID : PR87399217811
 Amount of Each Receipt this Period: **200.00**
 P/R Deduction (\$100.00 Bi-Weekly)

C. Gordon A Crawford
 Full Name (Last, First, Middle Initial)
 Mailing Address 8735 Richards Rd.
 City Utica State OH Zip Code 43080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: CARDINAL HEALTH, INC Occupation: Dir, IT Prog/Proj Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt: **06 / 30 / 2015**
Transaction ID : PR87399317811
 Amount of Each Receipt this Period: **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	314.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 73 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. David Lawrence
Full Name (Last, First, Middle Initial)
Mailing Address 326 Vinwood Lane
City Powell State OH Zip Code 43065
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Strategic Plng/Execution
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87399417811
Amount of Each Receipt this Period **100.00**
P/R Deduction (\$50.00 Bi-Weekly)

B. Stuart Martin
Full Name (Last, First, Middle Initial)
Mailing Address 9711 Concord Ridge Ct
City Brentwood State TN Zip Code 37027
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation Dir, Operations Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87399717811
Amount of Each Receipt this Period **38.00**
P/R Deduction (\$19.00 Bi-Weekly)

C. Lawrence Malham
Full Name (Last, First, Middle Initial)
Mailing Address 206 Lone Oak Drive
City White House State TN Zip Code 37188
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation Dir, Territory Sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87399817811
Amount of Each Receipt this Period **38.00**
P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	176.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. David E Gajeski
Full Name (Last, First, Middle Initial)

Mailing Address 21406 Saunton Dr.

City State Zip Code
Katy TX 77450

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

Name of Employer Occupation
CARDINAL HEALTH, INC VP, Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **494.00**

Date of Receipt
06 / 30 / 2015
Transaction ID : PR87400317811

Amount of Each Receipt this Period
76.00

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

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

Mailing Address 500 South Parkview Avenue Suite 305

City State Zip Code
Bexley OH 43209

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

Name of Employer Occupation
CARDINAL HEALTH, INC VP, Benefits

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **264.03**

Date of Receipt
06 / 30 / 2015
Transaction ID : PR87400817811

Amount of Each Receipt this Period
40.62

P/R Deduction (\$20.31 Bi-Weekly)

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

Mailing Address 6146 Balmoral Drive

City State Zip Code
Dublin OH 43017

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

Name of Employer Occupation
CARDINAL HEALTH, INC EVP, Enterprise Corporate Accoun

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **822.10**

Date of Receipt
06 / 30 / 2015
Transaction ID : PR87400917811

Amount of Each Receipt this Period
200.60

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

SUBTOTAL of Receipts This Page (optional)..... **317.22**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 75 OF 117
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Eric M Norman			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2015 Transaction ID : PR87401017811
Mailing Address 7170 Kingscote Ct.			Amount of Each Receipt this Period 38.00
City Dublin	State OH	Zip Code 43017	P/R Deduction (\$19.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.00	
Name of Employer CARDINAL HEALTH, INC	Occupation SVP, Human Resources	Aggregate Year-to-Date 247.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Theresa R Gould			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2015 Transaction ID : PR87401317811
Mailing Address 3418 Big Hickory Dr.			Amount of Each Receipt this Period 50.00
City Kingwood	State TX	Zip Code 77345	P/R Deduction (\$25.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer CARDINAL HEALTH, INC	Occupation VP, HR Business Partner	Aggregate Year-to-Date 325.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Tina M Stavinoha			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2015 Transaction ID : PR87401417811
Mailing Address 125 Arrow Road			Amount of Each Receipt this Period 38.00
City Eagle Lake	State TX	Zip Code 77434	P/R Deduction (\$19.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.00	
Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Learning Mgmt	Aggregate Year-to-Date 247.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	126.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Connie Woodburn		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87401517811
Mailing Address 9761 Erin Woods Dr		Amount of Each Receipt this Period 270.00
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation SVP, Prof & Govt Relations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1755.00	P/R Deduction (\$135.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Robbie D Jorgensen		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87401617811
Mailing Address 578 Morts Drive		Amount of Each Receipt this Period 76.00
City Wentzville	State MO	Zip Code 63385
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Operations Mgmt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00	P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Brian Worth		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87401917811
Mailing Address 5654 Rothesay Drive		Amount of Each Receipt this Period 100.00
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation SVP, HR Business Partner Pharma
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	446.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. David S Olson
 Full Name (Last, First, Middle Initial)
 Mailing Address 126 Marina Dr
 City Bullard State TX Zip Code 75757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Pharm Ops & Account Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87402317811
 Amount of Each Receipt this Period **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

B. Eric C Christensen
 Full Name (Last, First, Middle Initial)
 Mailing Address 8624 Greenarbor Rd
 City Albuquerque State NM Zip Code 87122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Asc Gen Csl, Comm/Trans
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **325.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87402417811
 Amount of Each Receipt this Period **50.00**
 P/R Deduction (\$25.00 Bi-Weekly)

C. Raymond Grotzinger
 Full Name (Last, First, Middle Initial)
 Mailing Address 0836 SW Curry St # 102
 City Portland State OR Zip Code 97239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Multi-Function Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87402717811
 Amount of Each Receipt this Period **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	126.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. David M Ellis
 Full Name (Last, First, Middle Initial)
 Mailing Address 6521 Goya Way
 City El Dorado Hills State CA Zip Code 95762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87402917811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Blair R Williams
 Full Name (Last, First, Middle Initial)
 Mailing Address 7000 Cardinal Place
 City Westerville State OH Zip Code 43081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, HR Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87403117811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

C. Andrew R Keller
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 3732
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Strategic Plng/Execution
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87403317811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 79 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Eric M Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 8078 Trail Lake Dr
City Powell State OH Zip Code 43065
FEC ID number of contributing federal political committee. **C**
Name of Employer: CARDINAL HEALTH, INC Occupation: VP, Fin Plng & Analysis
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **494.00**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87404017811
Amount of Each Receipt this Period: **76.00**
P/R Deduction (\$38.00 Bi-Weekly)

B. Donna B Mann
Full Name (Last, First, Middle Initial)
Mailing Address 6666 McVey Blvd
City West Worthington State OH Zip Code 43235
FEC ID number of contributing federal political committee. **C**
Name of Employer: CARDINAL HEALTH, INC Occupation: Prgm Dir, Prog/Proj Mgmt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **371.80**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87404217811
Amount of Each Receipt this Period: **57.20**
P/R Deduction (\$28.60 Bi-Weekly)

C. Kevin Harry
Full Name (Last, First, Middle Initial)
Mailing Address 3003 Breezewood Ln
City Galena State OH Zip Code 43021
FEC ID number of contributing federal political committee. **C**
Name of Employer: CARDINAL HEALTH, INC Occupation: VP, Fin Plng & Analysis
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **247.00**

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87404517811
Amount of Each Receipt this Period: **38.00**
P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **171.20**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 80 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Lauren E Fields
 Full Name (Last, First, Middle Initial)
 Mailing Address 4316 Oak Wood Court
 City State Zip Code
 Dublin OH 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC Dir, Sales Operations Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **247.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87404617811
 Amount of Each Receipt this Period
38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Marc D DeLorenzo
 Full Name (Last, First, Middle Initial)
 Mailing Address 231 Tiller Drive
 City State Zip Code
 Powell OH 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Territory Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **494.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87404917811
 Amount of Each Receipt this Period
76.00
 P/R Deduction (\$38.00 Bi-Weekly)

C. Eric T Bolling
 Full Name (Last, First, Middle Initial)
 Mailing Address 13162 Thornton Drive
 City State Zip Code
 Frisco TX 75035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Territory Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **247.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87405417811
 Amount of Each Receipt this Period
38.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	152.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 81 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Mary W Baxter
 Full Name (Last, First, Middle Initial)
 Mailing Address 3273 Stapleford Chase
 City Virginia Beach State VA Zip Code 23452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Pharm Ops & Account Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87405517811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. Kimberly A Robinette
 Full Name (Last, First, Middle Initial)
 Mailing Address 9409 Avemore Ct.
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC Dir, Finance Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87405717811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. Paul T Buster
 Full Name (Last, First, Middle Initial)
 Mailing Address 66 W Beechwold Blvd
 City Columbus State OH Zip Code 43214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC Dir, Software Engineering
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87405917811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	152.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Cameron J Brady		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87406217811
Mailing Address 873 N. Larrabee St. Unit 210		Amount of Each Receipt this Period 38.00
City Chicago	State IL	Zip Code 60610
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation Exec, Account	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	

Full Name (Last, First, Middle Initial) B. Scott Wolff		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87406517811
Mailing Address 1400 Waukegan Road Dutch Schmidt Bldg		Amount of Each Receipt this Period 38.00
City Chicago	State IL	Zip Code 60618
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Deployment Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	

Full Name (Last, First, Middle Initial) C. Brian K Singleton		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87406617811
Mailing Address 2521 East 31st Street		Amount of Each Receipt this Period 38.00
City Tulsa	State OK	Zip Code 74105
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Territory Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	

SUBTOTAL of Receipts This Page (optional).....▶	114.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 83 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. John S Lindsey
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 Timberknoll Loop
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, Enterprise Infrastructure
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR87406717811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. Craig C Baranski
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Massina Dr
 City Wheeling State WV Zip Code 26003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Operations Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR87406817811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. James E Bach
 Full Name (Last, First, Middle Initial)
 Mailing Address 133 Station Park Circle
 City Graylake State IL Zip Code 60030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Inventory Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR87406917811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 84 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 7483 Bardston Drive

City State Zip Code
Dublin OH 43017

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

Name of Employer Occupation
CARDINAL HEALTH, INC Dir, Software Engineering

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt
MM / DD / YYYY
06 / 30 / 2015

Transaction ID : PR87407017811

Amount of Each Receipt this Period
38.00

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

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

Mailing Address 1605 Berlin Station Rd

City State Zip Code
Delaware OH 43015

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

Name of Employer Occupation
CARDINAL HEALTH, INC Dir, Risk Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt
MM / DD / YYYY
06 / 30 / 2015

Transaction ID : PR87407117811

Amount of Each Receipt this Period
38.00

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

C. Harry Bedgood
Full Name (Last, First, Middle Initial)

Mailing Address 4852 McNulty Street

City State Zip Code
Grove City OH 43123

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

Name of Employer Occupation
CARDINAL HEALTH, INC VP, Operations Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt
MM / DD / YYYY
06 / 30 / 2015

Transaction ID : PR87407417811

Amount of Each Receipt this Period
38.00

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

SUBTOTAL of Receipts This Page (optional).....▶	114.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. John J Byrnes
Full Name (Last, First, Middle Initial)

Mailing Address 161 Tucker Dr

City State Zip Code
Worthington OH 43085

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

Name of Employer Occupation
CARDINAL HEALTH, INC VP, Tax Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **494.00**

Date of Receipt
06 / 30 / 2015

Transaction ID : PR87407617811

Amount of Each Receipt this Period
76.00

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

B. Andrew Grant
Full Name (Last, First, Middle Initial)

Mailing Address 9440 Nicholson way

City State Zip Code
Dublin OH 43017

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

Name of Employer Occupation
CARDINAL HEALTH, INC VP, Account

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt
06 / 30 / 2015

Transaction ID : PR87407717811

Amount of Each Receipt this Period
38.00

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

C. Kenneth H Robinette
Full Name (Last, First, Middle Initial)

Mailing Address 9409 Avemore Ct.

City State Zip Code
Dublin OH 43017

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

Name of Employer Occupation
CARDINAL HEALTH, INC VP, Deployment Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **494.00**

Date of Receipt
06 / 30 / 2015

Transaction ID : PR87407817811

Amount of Each Receipt this Period
76.00

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

SUBTOTAL of Receipts This Page (optional)..... **190.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Donald S Luchini
 Full Name (Last, First, Middle Initial)
 Mailing Address 212 Lakeside Drive
 City McKees Rocks State PA Zip Code 15136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC Dir, Fin Plng & Analysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87408217811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Dennis W Braun
 Full Name (Last, First, Middle Initial)
 Mailing Address 5667 Medallion Dr West
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC SVP, Finance Medical
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87408317811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. Jeffrey E Greer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1570 Cambridge Blvd
 City Marble Cliff State OH Zip Code 43212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Enterprise Architecture
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87408617811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	114.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 87 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Amelia D McCarty
 Full Name (Last, First, Middle Initial)
 Mailing Address 5864 Lakeview Dr
 City Hilliard State OH Zip Code 43026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: CARDINAL HEALTH, INC Occupation: Dir, Regulatory (Atty)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87408717811
 Amount of Each Receipt this Period: 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. James W Hillman
 Full Name (Last, First, Middle Initial)
 Mailing Address 141 Woodstream Dr
 City Grand Island State NY Zip Code 14072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: CARDINAL HEALTH, INC Occupation: VP, Direct Sales Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87409017811
 Amount of Each Receipt this Period: 60.00
 P/R Deduction (\$30.00 Bi-Weekly)

C. Colleen Greiner
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 51057
 City Myrtle Beach State SC Zip Code 29579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: CARDINAL HEALTH, INC Occupation: Exec, Account
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87409117811
 Amount of Each Receipt this Period: 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	136.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 88 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Gregory J Halvacs
 Full Name (Last, First, Middle Initial)
 Mailing Address 7402 Overland Trail
 City Delaware State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, Corporate Security
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87409417811
 Amount of Each Receipt this Period **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

B. Michael A Mone'
 Full Name (Last, First, Middle Initial)
 Mailing Address 4909 Scenic Creek Dr
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Asc Gen Csl, Regulatory
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87409517811
 Amount of Each Receipt this Period **76.00**
 P/R Deduction (\$38.00 Bi-Weekly)

c. Michael A Duffy
 Full Name (Last, First, Middle Initial)
 Mailing Address 729 Mohawk Street
 City Columbus State OH Zip Code 43206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Pres, Med Consumables
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87409617811
 Amount of Each Receipt this Period **40.00**
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	154.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Stanley L Nagel
 Full Name (Last, First, Middle Initial)
 Mailing Address 6486 Ballantrae Place
 City State Zip Code
 Dublin OH 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, HR Business Partner
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87409717811
 Amount of Each Receipt this Period
 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Martha Huston
 Full Name (Last, First, Middle Initial)
 Mailing Address 490 E. Sunburst Ln
 City State Zip Code
 Tempe AZ 85284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC President/CEO Canada
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87410117811
 Amount of Each Receipt this Period
 100.00
 P/R Deduction (\$50.00 Bi-Weekly)

C. Lisa Marling George
 Full Name (Last, First, Middle Initial)
 Mailing Address 9334 Pratinolo Villa Dr.
 City State Zip Code
 Dublin OH 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, Talent Mgmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87410217811
 Amount of Each Receipt this Period
 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	214.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 90 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Andrew T Alderman		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87410517811
Mailing Address 1225 Leicester Pl.		Amount of Each Receipt this Period 76.00
City Columbus	State OH	Zip Code 43235
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation SVP, Strategy & Bus Dev
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00	P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Shelley A Bird		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87410617811
Mailing Address 7998 Caraway Ave		Amount of Each Receipt this Period 200.00
City Dublin	State OH	Zip Code 43016
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation EVP, Office of the CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Robert S Thompson		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87410717811
Mailing Address 8338 Amberleigh Way		Amount of Each Receipt this Period 50.00
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation VP, Strategic Plng/Execution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	326.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 91 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Andrew W Wehr
 Full Name (Last, First, Middle Initial)
 Mailing Address 905 Little Bear Loop
 City Lewis Center State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Director, EH&S
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR87410817811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Ronald Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 7417 NewAlbanyLinkDr
 City New Albany State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Operations Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR87410917811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. ISMAEL VILLARREAL
 Full Name (Last, First, Middle Initial)
 Mailing Address 5032 CALLE TINTILLO
 City GUAYNABO State PR Zip Code 00966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, OPERATIONS MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 06 / 30 / 2015
Transaction ID : PR87411017811
 Amount of Each Receipt this Period 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	152.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. David R Dion
 Full Name (Last, First, Middle Initial)
 Mailing Address 182 N Flora Parkway
 City Addison State IL Zip Code 60101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Quality Control
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87411117811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Maureen T Girard
 Full Name (Last, First, Middle Initial)
 Mailing Address 552 Ridgeside Drive
 City Golden State CO Zip Code 80401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Marketing Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87411417811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. Jessica L Mayer
 Full Name (Last, First, Middle Initial)
 Mailing Address 4852 Carrigan Ridge
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Comm/Trans (Atty)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87411717811
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	136.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Stuart G Laws
 Full Name (Last, First, Middle Initial)
 Mailing Address 5635 Cypress Court
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation SVP, Chief Accounting Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87412017811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Bonny Fowler
 Full Name (Last, First, Middle Initial)
 Mailing Address 214 Cherry Street
 City Granville State OH Zip Code 43023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Comm Business Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87412317811
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$25.00 Bi-Weekly)

C. Anne Marie La Bue
 Full Name (Last, First, Middle Initial)
 Mailing Address 1877 Tewksbury Rd
 City Upper Arlington State OH Zip Code 43221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Asc Gen Csl, Labor/Employ
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87412417811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	126.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 94 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Sanjeeth Pai
Full Name (Last, First, Middle Initial)

Mailing Address 367 Cedar Trace

City Xenia State OH Zip Code 45385

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

Name of Employer: CARDINAL HEALTH, INC Occupation: VP, Pharm Strat Sourcing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt: **06 / 30 / 2015**

Transaction ID : PR87413517811

Amount of Each Receipt this Period: **38.00**

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

B. Christine L Bentley
Full Name (Last, First, Middle Initial)

Mailing Address 12283 South Parker Street

City Olathe State KS Zip Code 66061

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

Name of Employer: CARDINAL HEALTH, INC Occupation: Dir Mangng Cnslt, Reg Sciences M

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt: **06 / 30 / 2015**

Transaction ID : PR87413617811

Amount of Each Receipt this Period: **38.00**

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

C. Kevin L Martin
Full Name (Last, First, Middle Initial)

Mailing Address 804 Catalina Court

City Macon State MO Zip Code 63552

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

Name of Employer: CARDINAL HEALTH, INC Occupation: Dir, Manufacturing Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt: **06 / 30 / 2015**

Transaction ID : PR87413817811

Amount of Each Receipt this Period: **38.00**

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

SUBTOTAL of Receipts This Page (optional)..... **114.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 95 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Joseph A Gottron
Full Name (Last, First, Middle Initial)
Mailing Address 874 Aylesbury Drive
City Gahanna State OH Zip Code 43230
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation SVP, Pharmaceutical Segment IT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87413917811
Amount of Each Receipt this Period **40.00**
P/R Deduction (\$20.00 Bi-Weekly)

B. Jeffrey A Crist
Full Name (Last, First, Middle Initial)
Mailing Address 9376 Roseta Villa Drive
City Dublin State OH Zip Code 43016
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation Dir, IT Network
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87414217811
Amount of Each Receipt this Period **38.00**
P/R Deduction (\$19.00 Bi-Weekly)

C. Dianne Radigan
Full Name (Last, First, Middle Initial)
Mailing Address 900 Eastchester Dr
City Gahanna State OH Zip Code 43230
FEC ID number of contributing federal political committee. **C**
Name of Employer CARDINAL HEALTH, INC Occupation VP, Community Relations
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **494.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87415117811
Amount of Each Receipt this Period **76.00**
P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **154.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Sally Curley		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87415217811
Mailing Address 9035 Esin Court		Amount of Each Receipt this Period 150.00
City Powell	State OH	Zip Code 43065
FEC ID number of contributing federal political committee. C	P/R Deduction (\$75.00 Bi-Weekly)	
Name of Employer CARDINAL HEALTH, INC	Occupation SVP, Investor Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	

Full Name (Last, First, Middle Initial) B. George S Barrett		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87415317811
Mailing Address 246 E. Sycamore St.		Amount of Each Receipt this Period 384.60
City Columbus	State OH	Zip Code 43206
FEC ID number of contributing federal political committee. C	P/R Deduction (\$192.30 Bi-Weekly)	
Name of Employer CARDINAL HEALTH, INC	Occupation Chairman/CEO, Cardinal Health	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2499.90	

Full Name (Last, First, Middle Initial) C. Mark Pilkington		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87415817811
Mailing Address 8191 Hillingdon Drive		Amount of Each Receipt this Period 76.00
City Powell	State OH	Zip Code 43065
FEC ID number of contributing federal political committee. C	P/R Deduction (\$38.00 Bi-Weekly)	
Name of Employer CARDINAL HEALTH, INC	Occupation VP, Strategy Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00	

SUBTOTAL of Receipts This Page (optional).....▶	610.60
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Craig Morford
Full Name (Last, First, Middle Initial)

Mailing Address 5565 Lake Shore Ave,
City Westerville State OH Zip Code 43082

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

Name of Employer Occupation
CARDINAL HEALTH, INC Chief Legal/Compliance Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2499.90**

Date of Receipt
06 / 30 / 2015
Transaction ID : **PR87415917811**

Amount of Each Receipt this Period
384.60

P/R Deduction (\$192.30 Bi-Weekly)

B. Tohid A Vahedian
Full Name (Last, First, Middle Initial)

Mailing Address 1857 Collingswood Rd
City Columbus State OH Zip Code 43221

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

Name of Employer Occupation
CARDINAL HEALTH, INC SVP, GM Med Svcs & Solutions

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
06 / 30 / 2015
Transaction ID : **PR87416317811**

Amount of Each Receipt this Period
50.00

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

C. Michael J Mangione
Full Name (Last, First, Middle Initial)

Mailing Address 10733 Jones Road
City Clarence State NY Zip Code 14031

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

Name of Employer Occupation
CARDINAL HEALTH, INC Dir, Territory Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt
06 / 30 / 2015
Transaction ID : **PR87416417811**

Amount of Each Receipt this Period
38.00

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

SUBTOTAL of Receipts This Page (optional).....	472.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 98 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Eric J Perla
Full Name (Last, First, Middle Initial)

Mailing Address 15426 Court Amber TI

City Cypress	State TX	Zip Code 77433
-----------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Territory Sales
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR87416517811

Amount of Each Receipt this Period

38.00

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

B. Sean P Waters
Full Name (Last, First, Middle Initial)

Mailing Address 4505 East Broadway

City Gilbert	State AZ	Zip Code 85296
-----------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation Sr. Dir, Chem/Pharma Ops
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR87417117811

Amount of Each Receipt this Period

38.00

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

C. Henry M Chilton
Full Name (Last, First, Middle Initial)

Mailing Address 32 Palisades Parkway

City Oak Ridge	State TN	Zip Code 37830
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR87417217811

Amount of Each Receipt this Period

100.00

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

SUBTOTAL of Receipts This Page (optional).....▶	176.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 99 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 10744 Campden Lakes Blvd

City Dublin	State OH	Zip Code 43016
----------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation VP, Operations Services NPS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **494.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR87417317811

Amount of Each Receipt this Period

76.00

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

B. Luke C Augustine
Full Name (Last, First, Middle Initial)

Mailing Address 10834 S 166th St

City Omaha	State NE	Zip Code 68136
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR87417417811

Amount of Each Receipt this Period

100.00

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

C. Katherine A Benson
Full Name (Last, First, Middle Initial)

Mailing Address 3410 Nobb Hill Dr

City Hudsonville	State MI	Zip Code 49426
---------------------	-------------	-------------------

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

Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Nuclear Pharmacy
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR87417517811

Amount of Each Receipt this Period

38.00

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

SUBTOTAL of Receipts This Page (optional).....▶	214.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Carroll B B Callicott		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2015 Transaction ID : PR87417817811
Mailing Address 8050 Lesia Drive		Amount of Each Receipt this Period 38.00
City Denham Springs	State LA	Zip Code 70706
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation Mgr, Nuclear Pharmacy - Area
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Joseph E Lukacs		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2015 Transaction ID : PR87418117811
Mailing Address 18 Village Grove Rd		Amount of Each Receipt this Period 38.00
City Little Rock	State AR	Zip Code 72211
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Nuclear Pharmacy
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Marc B Mullen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2015 Transaction ID : PR87418517811
Mailing Address 1650 Sherborne Lane		Amount of Each Receipt this Period 100.00
City Powell	State OH	Zip Code 43065
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation VP, GM
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	176.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. Wayne J Boudreaux
 Full Name (Last, First, Middle Initial)
 Mailing Address 7328 Trade Court
 City Bradenton State FL Zip Code 34212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Nuclear Pharmacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87418817811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Craig Rothman
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 Seminole Way
 City Short Hills State NJ Zip Code 07078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Account (Enterprise Contrac
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87418917811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. Michael A Marusa
 Full Name (Last, First, Middle Initial)
 Mailing Address 1755 Woodledge Drive
 City State College State PA Zip Code 16803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Accounts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87419117811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	114.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 117
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Anita Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 27341 Dakota Ave.
 City Elko State MN Zip Code 55020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Exec, Account
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87419417811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

B. Cathy Chenetski
 Full Name (Last, First, Middle Initial)
 Mailing Address 5734 Ennishannon Place
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, QRA Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87419617811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. Alfredo S Russo
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 Manchester Court
 City Columbus State NJ Zip Code 08022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Regulatory Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR87420117811
 Amount of Each Receipt this Period 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	114.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. David K Orensten
Full Name (Last, First, Middle Initial)

Mailing Address 2341 Bryden Road

City Bexley State OH Zip Code 43209

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

Name of Employer: CARDINAL HEALTH, INC Occupation: Asst Gen Csl, Litigation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt: **06 / 30 / 2015**

Transaction ID : PR87420217811

Amount of Each Receipt this Period: **38.00**

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

B. Richard W Watson
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 991

City Sumner State WA Zip Code 98390

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

Name of Employer: CARDINAL HEALTH, INC Occupation: Dir, Operations Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt: **06 / 30 / 2015**

Transaction ID : PR87420317811

Amount of Each Receipt this Period: **38.00**

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

C. Rogelio A Armino
Full Name (Last, First, Middle Initial)

Mailing Address 6723 Stillhouse Ln

City Dublin State OH Zip Code 43016

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

Name of Employer: CARDINAL HEALTH, INC Occupation: Dir, Master Black Belt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt: **06 / 30 / 2015**

Transaction ID : PR87420417811

Amount of Each Receipt this Period: **38.00**

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

SUBTOTAL of Receipts This Page (optional)..... **114.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Eleanor M Daufenbach			Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87420517811
Mailing Address 2029 W. Lane Avenue			Amount of Each Receipt this Period 38.00
City Columbus	State OH	Zip Code 43221	P/R Deduction (\$19.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Marketing Mgmt	Aggregate Year-to-Date 247.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Patricia Morrison			Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87420617811
Mailing Address 55 East Erie #3801			Amount of Each Receipt this Period 384.60
City Chicago	State IL	Zip Code 60611	P/R Deduction (\$192.30 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer CARDINAL HEALTH, INC	Occupation EVP Customer Care Shared Service	Aggregate Year-to-Date 2499.90	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Gilberto Quintero			Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87421217811
Mailing Address 6650 Brodie Blvd			Amount of Each Receipt this Period 76.00
City Dublin	State OH	Zip Code 43017	P/R Deduction (\$38.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer CARDINAL HEALTH, INC	Occupation SVP, QRA	Aggregate Year-to-Date 494.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....	498.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Colin Hatch
Full Name (Last, First, Middle Initial)

Mailing Address 1351 Noe Bixby Road

City Columbus State OH Zip Code 43232

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

Name of Employer: CARDINAL HEALTH, INC
Occupation: Dir, Tax

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87421517811

Amount of Each Receipt this Period: 38.00

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

B. Lane Cheramie
Full Name (Last, First, Middle Initial)

Mailing Address 152 West 117th Street

City Cut Off State LA Zip Code 70345

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

Name of Employer: CARDINAL HEALTH, INC
Occupation: Dir, Health System Pharmacy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 494.00

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87421617811

Amount of Each Receipt this Period: 76.00

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

C. Douglas Helmreich
Full Name (Last, First, Middle Initial)

Mailing Address 6600 Deeside Dr.

City Dublin State OH Zip Code 43017

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

Name of Employer: CARDINAL HEALTH, INC
Occupation: Dir, Market Research

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt: 06 / 30 / 2015
Transaction ID : PR87421717811

Amount of Each Receipt this Period: 38.00

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

SUBTOTAL of Receipts This Page (optional)..... ▶ 152.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 106 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Robert J Doone
 Full Name (Last, First, Middle Initial)
 Mailing Address 6119 Peppergrass Court
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Integrated Logistics Svcs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87422217811
 Amount of Each Receipt this Period **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

B. Jeffrey P Ledbetter
 Full Name (Last, First, Middle Initial)
 Mailing Address 6700 Ridpath Road
 City Grove City State OH Zip Code 43123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Cnslt, Account
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87422317811
 Amount of Each Receipt this Period **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

C. Michelle M Zaluzney
 Full Name (Last, First, Middle Initial)
 Mailing Address 15435 Eagle Tavern Lane
 City Centreville State VA Zip Code 20120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Exec, Territory Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR87422417811
 Amount of Each Receipt this Period **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	114.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 107 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Meghan Fitzgerald		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87422817811
Mailing Address 6 Morgan		Amount of Each Receipt this Period 100.00
City Norwalk	State CT	Zip Code 06851
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation EVP, Strategy and Health Policy
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Marsha L Aragon		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87422917811
Mailing Address 27126 Highlands Ln		Amount of Each Receipt this Period 38.00
City Valencia	State CA	Zip Code 91354
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Operations Mgmt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00	P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Daniel Movens		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87423117811
Mailing Address 678 Woodland Bayou Drive		Amount of Each Receipt this Period 100.00
City Santa Rosa Beach	State FL	Zip Code 32459
FEC ID number of contributing federal political committee. C	Name of Employer CARDINAL HEALTH, INC	Occupation SVP/GM, ParMed Pharmaceutical
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	238.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Stephen J Medve			Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87423317811
Mailing Address 8153 Timble Falls Drive			Amount of Each Receipt this Period 38.00
City Dublin	State OH	Zip Code 43016	P/R Deduction (\$19.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Talent Acquisition		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00		

Full Name (Last, First, Middle Initial) B. Richard Montgomery			Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87423717811
Mailing Address 2717 Queen Elaine Drive			Amount of Each Receipt this Period 38.00
City Lewisville	State TX	Zip Code 75056	P/R Deduction (\$19.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Technical Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00		

Full Name (Last, First, Middle Initial) C. Ramon Gregory			Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87423917811
Mailing Address 9003 Mediterra Place			Amount of Each Receipt this Period 50.00
City Dublin	State OH	Zip Code 43016	P/R Deduction (\$25.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer CARDINAL HEALTH, INC	Occupation SVP, Customer Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

SUBTOTAL of Receipts This Page (optional).....▶	126.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 109 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Nicholas Augustinos			Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR87424117811
Mailing Address 2416 15th Street			Amount of Each Receipt this Period 200.00
City San Francisco	State CA	Zip Code 94114	P/R Deduction (\$100.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1300.00	
Name of Employer CARDINAL HEALTH, INC	Occupation SVP, Health Info & Strategy	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Robert A Honner			Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR93409117811
Mailing Address 7167 Springview Ln			Amount of Each Receipt this Period 38.00
City Dublin	State OH	Zip Code 43016	P/R Deduction (\$19.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 247.00	
Name of Employer CARDINAL HEALTH, INC	Occupation VP, Fin Plng & Analysis	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Cathy Mock			Date of Receipt MM / DD / YYYY 06 / 30 / 2015 Transaction ID : PR93409217811
Mailing Address 5440 York Lane North			Amount of Each Receipt this Period 38.00
City Columbus	State OH	Zip Code 43232	P/R Deduction (\$19.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 247.00	
Name of Employer CARDINAL HEALTH, INC	Occupation Dir, Supplier Diversity	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Receipts This Page (optional).....▶	276.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 117
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Kelly B Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 7000 Cardinal Place
 City State Zip Code
 Dublin OH 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC VP, HR Business Partner
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR93689217811
 Amount of Each Receipt this Period
 76.00
 P/R Deduction (\$38.00 Bi-Weekly)

B. Jyothirmayi Cherry
 Full Name (Last, First, Middle Initial)
 Mailing Address 5136 Abbotsbury Court
 City State Zip Code
 New Albany OH 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC Dir, Fin Plng & Analysis
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR93938817811
 Amount of Each Receipt this Period
 38.00
 P/R Deduction (\$19.00 Bi-Weekly)

C. Debbie J Mitchell
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 Alban Mews
 City State Zip Code
 New Albany OH 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARDINAL HEALTH, INC SVP, Corporate Communications
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : PR94089917811
 Amount of Each Receipt this Period
 100.00
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	214.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 111 OF 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Eusebio Zamora

Mailing Address 9450 Tartan Ridge Blvd

City State Zip Code
Dublin OH 43017

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

Name of Employer Occupation
CARDINAL HEALTH, INC Dir, Pharmacy Support

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **247.00**

Date of Receipt
06 / 30 / 2015
Transaction ID : PR94090017811

Amount of Each Receipt this Period
38.00

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

Full Name (Last, First, Middle Initial)
B. Donald M Casey

Mailing Address 7708 Tillinghast Drive

City State Zip Code
Dublin OH 43017

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

Name of Employer Occupation
CARDINAL HEALTH, INC CEO, Medical Segment

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2499.90**

Date of Receipt
06 / 30 / 2015
Transaction ID : PR94134317811

Amount of Each Receipt this Period
384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Shauna M Latshaw

Mailing Address 6069 Tournament Drive

City State Zip Code
Westerville OH 43082

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

Name of Employer Occupation
CARDINAL HEALTH, INC VP, Software Engineering

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **494.00**

Date of Receipt
06 / 30 / 2015
Transaction ID : PR99505117811

Amount of Each Receipt this Period
76.00

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

SUBTOTAL of Receipts This Page (optional)..... **498.60**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 112 OF 117
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Alan L Deutschendorf
 Full Name (Last, First, Middle Initial)
 Mailing Address 8243 Worley Dr.
 City Lewis Center State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Deployment Leader
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR99505217811
 Amount of Each Receipt this Period **40.00**
 P/R Deduction (\$20.00 Bi-Weekly)

B. Sean C Raynak
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 Mallard Drive
 City Monroeville State PA Zip Code 15146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation Dir, Pharm Ops Mgmt - Non-rph
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **247.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR99563117811
 Amount of Each Receipt this Period **38.00**
 P/R Deduction (\$19.00 Bi-Weekly)

C. Ge Cao
 Full Name (Last, First, Middle Initial)
 Mailing Address 5360 Fort Ward Drive
 City New Albany State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARDINAL HEALTH, INC Occupation VP, Info Services & Analytics
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **325.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : PR99977517811
 Amount of Each Receipt this Period **50.00**
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	128.00
TOTAL This Period (last page this line number only).....	21927.46

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Buck For Colorado 2016		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address P.O. Box 338018		Transaction ID : 9242719
City Greeley	State CO	
Purpose of Disbursement Direct Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name Rep. Ken Buck	Direct Contribution	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO District: 04		

Full Name (Last, First, Middle Initial) B. Grassley Committee Inc.		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address PO Box 1000		Transaction ID : 9242720
City Des Moines	State IA	
Purpose of Disbursement Direct Contribution	Category/ Type 011	Amount of Each Disbursement this Period 2500.00
Candidate Name Sen. Charles E. Grassley	Direct Contribution	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District:		

Full Name (Last, First, Middle Initial) C. Marino for Congress		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address PO Box 653		Transaction ID : 9242736
City Williamsport	State PA	
Purpose of Disbursement Direct Contribution	Category/ Type 011	Amount of Each Disbursement this Period 2500.00
Candidate Name Rep. Tom Marino	Direct Contribution	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 10		

SUBTOTAL of Disbursements This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. National Assoc of Chain Drug Stores PAC

Mailing Address 413 N Lee St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Direct Contribution

011

Candidate Name

National Assoc of Chain Drug Stores PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2015

Transaction ID : 9242737

Amount of Each Disbursement this Period

2500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

B. HDMA PAC

Mailing Address 901 N. Glebe Rd Ste 1000

City Alexandria State VA Zip Code 22203

Purpose of Disbursement
Direct Contribution

011

Candidate Name

HDMA PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2015

Transaction ID : 9242738

Amount of Each Disbursement this Period

2500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

C. Friends Of Susan Brooks

Mailing Address 9425 N Meridian Street
237

City Indianapolis State IN Zip Code 46260

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Rep. Susan Brooks

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IN District: 05

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2015

Transaction ID : 9256727

Amount of Each Disbursement this Period

2000.00

Direct Contribution

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

7000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. Tony Cardenas for Congress

Mailing Address 300 New Jersey Ave., NW
Suite 900

City Washington State DC Zip Code 20001

Purpose of Disbursement
Direct Contribution

011
Category/
Type

Candidate Name

Rep. Tony Cardenas

Office Sought: House
 Senate
 President
State: CA District: 29

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2015

Transaction ID : 9275663

Amount of Each Disbursement this Period

1000.00

Direct Contribution

Full Name (Last, First, Middle Initial)

B. Marino for Congress

Mailing Address PO Box 653

City Williamsport State PA Zip Code 17703

Purpose of Disbursement
Direct Contribution

011
Category/
Type

Candidate Name

Rep. Tom Marino

Office Sought: House
 Senate
 President
State: PA District: 10

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2015

Transaction ID : 9275664

Amount of Each Disbursement this Period

2500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

C. Beatty For Congress

Mailing Address 233 South High St
Suite 300

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Direct Contribution

011
Category/
Type

Candidate Name

Ms. Joyce Beatty

Office Sought: House
 Senate
 President
State: OH District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 24 / 2015

Transaction ID : 9279110

Amount of Each Disbursement this Period

5000.00

Direct Contribution

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

8500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. Bob Casey For Senate Inc

Mailing Address PO Box 58746

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement
Direct Contribution

011

Candidate Name
Sen. Bob Casey Jr.

Category/
Type

Office Sought: House
 Senate
 President
State: PA District:

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	5

Transaction ID : 9279117

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Direct Contribution

Full Name (Last, First, Middle Initial)

B. The American Dream Project

Mailing Address PO BOX 2465

City Springfield State VA Zip Code 22152

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	5

Transaction ID : 9279120

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Direct Contribution

Full Name (Last, First, Middle Initial)

C. America Works PAC

Mailing Address 426 C Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Joint Fundraiser

011

Candidate Name
Rep. Cathy McMorris Rodgers

Category/
Type

Office Sought: House
 Senate
 President
State: WA District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	5

Transaction ID : 9279471

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Joint Fundraiser

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

1	2	5	0	.	0	0
---	---	---	---	---	---	---

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

1	2	5	0	.	0	0
---	---	---	---	---	---	---

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. Holding Onto Oregon's Priorities

Mailing Address PO Box 3314

City Portland State OR Zip Code 97208

Purpose of Disbursement
Direct Contribution

011

Category/
Type

Candidate Name

Holding Onto Oregon's Priorities

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2015

Transaction ID : 9282714

Amount of Each Disbursement this Period

5000.00

Direct Contribution

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

5000.00

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

39000.00
