

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 07 01 2006 through 07 31 2006

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

Signature of Treasurer Electronically Filed by JAMES W. HOEBERLING Date 08 15 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		282080.14
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	285713.27									
(c) Total Receipts (from Line 19)	14011.52	108144.65								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	299724.79	390224.79								
7. Total Disbursements (from Line 31)	30700.00	121200.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	269024.79	269024.79								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

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

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	10483.25	59331.52
(i) Itemized (use Schedule A)	2507.71	42910.54
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	12990.96	102242.06
(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)	12990.96	102242.06
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.)	1020.56	5902.59
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	14011.52	108144.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	14011.52	108144.65

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	2700.00	2700.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	2700.00	2700.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	88000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	3000.00	30500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	30700.00	121200.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	30700.00	121200.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	12990.96	102242.06
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12990.96	102242.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2700.00	2700.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2700.00	2700.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Brooke Alexy		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 15401 Oak Pond Lane		Transaction ID: 60815.C75196	
City State Zip Code Libertyville IL 60048	Amount of Each Receipt this Period 135.34		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Counsel, Asst General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1015.05		
		Payroll Deduction: (67.67- /Pay Period)	

Full Name (Last, First, Middle Initial) B. David Anderson		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 7977 Wingate Place		Transaction ID: 60815.C75063	
City State Zip Code Delaware OH 43015	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Evp, Sales/mktg - Alt Care		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		Payroll Deduction: (20.00- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Charles Armstrong		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 3290 Santolina Dr		Transaction ID: 60815.C75081	
City State Zip Code Las Vegas NV 89135	Amount of Each Receipt this Period 43.08		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Architect - Financial Systems		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.18		
		Payroll Deduction: (21.54- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	218.42
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Charles Artillio

Mailing Address 14 Teal Drive

City Langhorne State PA Zip Code 19047

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

Name of Employer Cardinal Health, Inc Occupation Svp, Bus Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 785.76

Date of Receipt
MM / DD / YYYY
07 / 07 / 2006

Transaction ID: 60815.C75064

Amount of Each Receipt this Period
40.00

Receipt

Payroll Deduction: (20.00- /Pay Period)

B. Full Name (Last, First, Middle Initial)
Cassandra Baker

Mailing Address 1672 Barrington 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 Dir, State Govt Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 663.45

Date of Receipt
MM / DD / YYYY
07 / 07 / 2006

Transaction ID: 60815.C75144

Amount of Each Receipt this Period
88.46

Receipt

Payroll Deduction: (44.23- /Pay Period)

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

Mailing Address 2761 Skelton Ln

City Blacklick State OH Zip Code 43004

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

Name of Employer Cardinal Health, Inc Occupation Dir, Consumer Health Product

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.35

Date of Receipt
MM / DD / YYYY
07 / 07 / 2006

Transaction ID: 60815.C75061

Amount of Each Receipt this Period
40.18

Receipt

Payroll Deduction: (20.09- /Pay Period)

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 14566 Somerset Cir

City State Zip Code
Green Oaks IL 60048

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

Name of Employer Cardinal Health, Inc Occupation Svp, Manufacturing

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 370.50

Date of Receipt
07 / 07 / 2006

Transaction ID: 60815.C75089

Amount of Each Receipt this Period
49.40

Receipt

Payroll Deduction: (24.70- /Pay Period)

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

Mailing Address 1723 Eagle Trl

City State Zip Code
Oxford MI 48371

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

Name of Employer Cardinal Health, Inc Occupation Dir, Reg

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00

Date of Receipt
07 / 07 / 2006

Transaction ID: 60815.C75090

Amount of Each Receipt this Period
50.00

Receipt

Payroll Deduction: (25.00- /Pay Period)

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

Mailing Address 15 Kerby Lane

City State Zip Code
Mendham NJ 07945-2901

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

Name of Employer Cardinal Health, Inc Occupation Svp, Gm

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 367.65

Date of Receipt
07 / 07 / 2006

Transaction ID: 60815.C75086

Amount of Each Receipt this Period
49.02

Receipt

Payroll Deduction: (24.51- /Pay Period)

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Robert Bergstrom		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 7425 Vista Del Mar		Transaction ID: 60815.C75092	
City State Zip Code La Jolla CA 92037	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Gm	Payroll Deduction: (25.00- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		

Full Name (Last, First, Middle Initial) B. Porter Bertelson		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 6895 Macneil Dr		Transaction ID: 60815.C75115	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 69.66		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Marketing	Payroll Deduction: (34.83- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 522.45		

Full Name (Last, First, Middle Initial) C. Timothy Boes		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 103 La Trobe Ct		Transaction ID: 60815.C75208	
City State Zip Code Southlake TX 76092	Amount of Each Receipt this Period 167.02		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Medication Solutions	Payroll Deduction: (83.51- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1252.65		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. William Bolding		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006
Mailing Address 1116 Keats Court		Transaction ID: 60815.C75076
City Lansdale	State PA	Zip Code 19446
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 40.00
Name of Employer Cardinal Health, Inc	Occupation Vp, Operations	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Payroll Deduction: (20.00- /Pay Period)

Full Name (Last, First, Middle Initial) B. Scott Bostick		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006
Mailing Address 1546 Vivaldi Drive		Transaction ID: 60815.C75140
City Cardiff	State CA	Zip Code 92007
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 80.00
Name of Employer Cardinal Health, Inc	Occupation Vp, Gm-supply Chain Solution	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	Payroll Deduction: (40.00- /Pay Period)

Full Name (Last, First, Middle Initial) C. Anne Bouchenoire		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006
Mailing Address 5772 Banavie Ct		Transaction ID: 60815.C75119
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 74.00
Name of Employer Cardinal Health, Inc	Occupation Vp, Global Branding	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 555.00	Payroll Deduction: (37.00- /Pay Period)

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

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

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

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

Full Name (Last, First, Middle Initial) A. Mark Branday		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 55 Island Blvd		Transaction ID: 60815.C75105	
City State Zip Code Fox Island WA 98333	Amount of Each Receipt this Period 29.48		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Integrated Solutions		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 412.72		
		Payroll Deduction: (29.48- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Mark Branday		Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2006	
Mailing Address 55 Island Blvd		Transaction ID: 60815.C75426	
City State Zip Code Fox Island WA 98333	Amount of Each Receipt this Period 30.77		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Integrated Solutions		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 443.49		
		Payroll Deduction: (30.77- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Michael Brown		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 3103 Saddle Ridge		Transaction ID: 60815.C75006	
City State Zip Code Richmond TX 77469	Amount of Each Receipt this Period 28.46		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Pharm Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.45		
		Payroll Deduction: (14.23- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	88.71
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

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

Full Name (Last, First, Middle Initial) A. Thomas Burke		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006
Mailing Address 21 Parsons Drive		Transaction ID: 60815.C75038
City Swampscott	State MA	Zip Code 01907
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.83
Name of Employer Cardinal Health, Inc	Occupation Pres, Northeast Region	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.62	Payroll Deduction: (19.83- /Pay Period)

Full Name (Last, First, Middle Initial) B. Thomas Burke		Date of Receipt M M / D D / Y Y Y Y Y 07 / 21 / 2006
Mailing Address 21 Parsons Drive		Transaction ID: 60815.C75395
City Swampscott	State MA	Zip Code 01907
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.52
Name of Employer Cardinal Health, Inc	Occupation Pres, Northeast Region	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 299.14	Payroll Deduction: (21.52- /Pay Period)

Full Name (Last, First, Middle Initial) C. Gary Cacciatore		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006
Mailing Address 3810 Loch Glen Court		Transaction ID: 60815.C75103
City Houston	State TX	Zip Code 77059
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 56.18
Name of Employer Cardinal Health, Inc	Occupation Dir, Affairs - Counsel-regltry	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 421.35	Payroll Deduction: (28.09- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	97.53
TOTAL This Period (last page this line number only)	▶	

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

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

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

Full Name (Last, First, Middle Initial) A. Thomas Calhoun		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 5n496 W Lakeview Cir		Transaction ID: 60815.C75101
City State Zip Code St Charles IL 60175	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 54.14
Name of Employer Cardinal Health, Inc	Occupation Svp, Pharma Dist Group	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 406.05	Payroll Deduction: (27.07- /Pay Period)

Full Name (Last, First, Middle Initial) B. Steven Callison		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 1368 Lincoln Road		Transaction ID: 60815.C75003
City State Zip Code Columbus OH 43212	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 28.12
Name of Employer Cardinal Health, Inc	Occupation Vp, Service Delivery	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.90	Payroll Deduction: (14.06- /Pay Period)

Full Name (Last, First, Middle Initial) C. Debra Caravelli		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 4862 Vista Ridge Dr		Transaction ID: 60815.C75078
City State Zip Code Dublin OH 43017	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.38
Name of Employer Cardinal Health, Inc	Occupation Svp, Hr Service Deliv/vend Mgm	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.73	Payroll Deduction: (20.19- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	122.64
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

Full Name (Last, First, Middle Initial) A. Nicole Cardosa		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 3248 Brant Street		Transaction ID: 60815.C75074	
City State Zip Code San Diego CA 92103	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Dir, Sales - Regional		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		
		Payroll Deduction: (20.00- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Douglas Cones		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 4826 Macallan Court West		Transaction ID: 60815.C75032	
City State Zip Code Dublin OH 43017-8269	Amount of Each Receipt this Period 35.96		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Finance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 269.70		
		Payroll Deduction: (17.98- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Mary Cooney		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 5151 Edloe # 13207		Transaction ID: 60815.C75180	
City State Zip Code Houston TX 77005	Amount of Each Receipt this Period 101.50		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Hr Business Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 761.25		
		Payroll Deduction: (50.75- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	177.46
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

Full Name (Last, First, Middle Initial) A. Bonita Court Mailing Address 1306 Downs Parkway City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006 Transaction ID: 60815.C75080 Amount of Each Receipt this Period 43.04 Receipt Payroll Deduction: (21.52- /Pay Period)
Name of Employer Cardinal Health, Inc Occupation Sr Mgr, Sls & Mktg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 322.40		

Full Name (Last, First, Middle Initial) B. Jody Davids Mailing Address 7638 Red Bay Court City State Zip Code Dublin OH 43016 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006 Transaction ID: 60815.C75178 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00- /Pay Period)
Name of Employer Cardinal Health, Inc Occupation Evp, Cio Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) C. Ronald Dedels Mailing Address 4840 Paddington Way City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006 Transaction ID: 60815.C75025 Amount of Each Receipt this Period 31.06 Receipt Payroll Deduction: (15.53- /Pay Period)
Name of Employer Cardinal Health, Inc Occupation Vp, Sales Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 232.95		

SUBTOTAL of Receipts This Page (optional)	174.10
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

Full Name (Last, First, Middle Initial) A. Ted Dibiase		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 4949 Chaddington Dr		Transaction ID: 60815.C75184
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 118.04
Name of Employer Cardinal Health, Inc	Occupation Vp, Advice & Counsel Ctr	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 885.30	Payroll Deduction: (59.02- /Pay Period)

Full Name (Last, First, Middle Initial) B. Scott Dodson		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 7000 Grate Park Dr		Transaction ID: 60815.C75035
City New Albany	State OH	Zip Code 43054
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.50
Name of Employer Cardinal Health, Inc	Occupation Controller, Nlc	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.05	Payroll Deduction: (19.25- /Pay Period)

Full Name (Last, First, Middle Initial) C. Gary Dolch		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 8382 Deep Run		Transaction ID: 60815.C75120
City Powell	State OH	Zip Code 43065
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Cardinal Health, Inc	Occupation Evp, Quality	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 562.50	Payroll Deduction: (37.50- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	231.54
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

Full Name (Last, First, Middle Initial) A. Michael Duffy		Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2006	
Mailing Address 6825 Macneil Drive		Transaction ID: 60815.C74906	
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation SVP Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Charles Echols		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 5369 Lake Shore Ave		Transaction ID: 60815.C75010	
City Westerville	State OH	Zip Code 43082	Amount of Each Receipt this Period 29.38
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Enviro Health & Safety		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.35		
		Payroll Deduction: (14.69- /Pay Period)	

Full Name (Last, First, Middle Initial) C. James Egan		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 4650 Aberdeen Ave		Transaction ID: 60815.C75096	
City Dublin	State OH	Zip Code 43016	Amount of Each Receipt this Period 51.36
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Enterprise It		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.20		
		Payroll Deduction: (25.68- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	580.74
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Eric Ellingson

Mailing Address 1308 Dancer Ct

City State Zip Code
Libertyville IL 60048

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

Name of Employer Cardinal Health, Inc Occupation Dir, R&am;d

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 392.25

Date of Receipt
MM / DD / YYYY
07 / 07 / 2006

Transaction ID: 60815.C75098

Amount of Each Receipt this Period
52.30

Receipt

Payroll Deduction: (26.15- /Pay Period)

B. Full Name (Last, First, Middle Initial)
Sue Ellen Erickson

Mailing Address 21 Springfield 1a

City State Zip Code
Cranford NJ 07016

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

Name of Employer Cardinal Health, Inc Occupation Mgr li, Service

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.05

Date of Receipt
MM / DD / YYYY
07 / 07 / 2006

Transaction ID: 60815.C75026

Amount of Each Receipt this Period
31.34

Receipt

Payroll Deduction: (15.67- /Pay Period)

C. Full Name (Last, First, Middle Initial)
Leeann Evensen

Mailing Address 1423 Shady Valley

City State Zip Code
Sugar Land TX 77479

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
07 / 07 / 2006

Transaction ID: 60815.C75018

Amount of Each Receipt this Period
30.00

Receipt

Payroll Deduction: (15.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ► **113.64**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Jo Anne Fasetti		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 1163 Vineyard Dr		Transaction ID: 60815.C75145
City Gurnee	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 89.56
Name of Employer Cardinal Health, Inc	Occupation Svp, Hr Business Partner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 671.70	Payroll Deduction: (44.78- /Pay Period)

Full Name (Last, First, Middle Initial) B. Eric Feltes		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 718 Woodridge Trail		Transaction ID: 60815.C75082
City Mchenry	State IL	Zip Code 60050
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 44.00
Name of Employer Cardinal Health, Inc	Occupation Mgr, Business Development	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	Payroll Deduction: (22.00- /Pay Period)

Full Name (Last, First, Middle Initial) C. Nathaniel Filler		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 777 Military Drive		Transaction ID: 60815.C75036
City Galloway	State OH	Zip Code 43119
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.24
Name of Employer Cardinal Health, Inc	Occupation Mgr, Gov't Relations - St	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.30	Payroll Deduction: (19.62- /Pay Period)

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Stephen Flannery

Mailing Address 275 East Center St

City State Zip Code
Shavertown PA 18708

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 ▼ 197.96

Date of Receipt
MM / DD / YYYY
07 / 07 / 2006

Transaction ID: 60815.C75004

Amount of Each Receipt this Period
14.14

Receipt

Payroll Deduction: (14.14- /Pay Period)

B. Full Name (Last, First, Middle Initial)
Stephen Flannery

Mailing Address 275 East Center St

City State Zip Code
Shavertown PA 18708

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 ▼ 214.58

Date of Receipt
MM / DD / YYYY
07 / 21 / 2006

Transaction ID: 60815.C75342

Amount of Each Receipt this Period
16.62

Receipt

Payroll Deduction: (16.62- /Pay Period)

C. Full Name (Last, First, Middle Initial)
Karen Flynn

Mailing Address 205 Rising Hill Ln

City State Zip Code
Chester Springs PA 19425

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

Name of Employer Cardinal Health, Inc Occupation Vp, Global Accounts Team

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
07 / 07 / 2006

Transaction ID: 60815.C75067

Amount of Each Receipt this Period
40.00

Receipt

Payroll Deduction: (20.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ► 70.76

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Brendan Ford		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 798 Tweed Court		Transaction ID: 60815.C74978	
City Worthington	State OH	Amount of Each Receipt this Period 200.00	
Zip Code 43085		Receipt	
FEC ID number of contributing federal political committee. C		Payroll Deduction: (100.0-0/Pay Period)	
Name of Employer Cardinal Health, Inc	Occupation Evp, Corp Dev	Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	Receipt	

Full Name (Last, First, Middle Initial) B. David Fries		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 4491 Hickory Rock Dr		Transaction ID: 60815.C75016	
City Powell	State OH	Amount of Each Receipt this Period 30.00	
Zip Code 43065		Receipt	
FEC ID number of contributing federal political committee. C		Payroll Deduction: (15.00-/Pay Period)	
Name of Employer Cardinal Health, Inc	Occupation Deployment Leader, Corporate	Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	Receipt	

Full Name (Last, First, Middle Initial) C. Shawn Gallagher		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 9501 Bartons Creekrd		Transaction ID: 60815.C75073	
City Raleigh	State NC	Amount of Each Receipt this Period 40.00	
Zip Code 27615		Receipt	
FEC ID number of contributing federal political committee. C		Payroll Deduction: (20.00-/Pay Period)	
Name of Employer Cardinal Health, Inc	Occupation Vp/gm	Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Receipt	

SUBTOTAL of Receipts This Page (optional) ▶	270.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Robert Gentile		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 403 Stuart Ct		Transaction ID: 60815.C75009	
City State Zip Code Thorofare NJ 08086	Amount of Each Receipt this Period 29.36		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Gm	Payroll Deduction: (14.68- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.20		

Full Name (Last, First, Middle Initial) B. Robert Giacalone		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 7471 Balfoure Circle		Transaction ID: 60815.C75122	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 77.12		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Reg Affairs/chf Reg Cnsl	Payroll Deduction: (38.56- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 578.40		

Full Name (Last, First, Middle Initial) C. James Gill		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 1529 Woodvale Avenue		Transaction ID: 60815.C75021	
City State Zip Code Deerfield IL 60015	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Dmg	Payroll Deduction: (15.00- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional) ▶	136.48
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Robert Glover		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 5633 N Kostner Ave		Transaction ID: 60815.C75097	
City State Zip Code Chicago IL 60646	Amount of Each Receipt this Period 52.26		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Vp, Hlth Sys		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 391.95		
		Payroll Deduction: (26.13- /Pay Period)	

Full Name (Last, First, Middle Initial) B. David Goldsberry		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 321 St Andrews Ln		Transaction ID: 60815.C75030	
City State Zip Code Gurnee IL 60031	Amount of Each Receipt this Period 16.85		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Svp, Govt Sales And Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.90		
		Payroll Deduction: (16.85- /Pay Period)	

Full Name (Last, First, Middle Initial) C. David Goldsberry		Date of Receipt M M / D D / Y Y Y Y Y 07 / 21 / 2006	
Mailing Address 321 St Andrews Ln		Transaction ID: 60815.C75346	
City State Zip Code Gurnee IL 60031	Amount of Each Receipt this Period 18.46		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Svp, Govt Sales And Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 254.36		
		Payroll Deduction: (18.46- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	87.57
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Theresa Gould		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 3418 Big Hickory Dr.		Transaction ID: 60815.C75027
City Kingwood	State TX	Zip Code 77345
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.12
Name of Employer Cardinal Health, Inc	Occupation Vp, Hr Business Partner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.69	Payroll Deduction: (16.06- /Pay Period)

Full Name (Last, First, Middle Initial) B. Michael Groesbeck		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 33916 Summerfield		Transaction ID: 60815.C75033
City Gurnee	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.54
Name of Employer Cardinal Health, Inc	Occupation Svp, Qra	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.49	Payroll Deduction: (18.27- /Pay Period)

Full Name (Last, First, Middle Initial) C. Debra Hadley		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 2698 Berwyn Road		Transaction ID: 60815.C75110
City Columbus	State OH	Zip Code 43221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Cardinal Health, Inc	Occupation Dir, Community Aff/ Contribute	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	Payroll Deduction: (30.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	128.66
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. L Glenn Hall		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006
Mailing Address 6678 Willow Grove Ln Circle #1502		Transaction ID: 60815.C75104
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 58.52	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Gm	Payroll Deduction: (29.26- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.90	

Full Name (Last, First, Middle Initial) B. Troy Hanson		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006
Mailing Address 5622 Dorsey Drive		Transaction ID: 60815.C75084
City State Zip Code Columbus OH 43235	Amount of Each Receipt this Period 44.44	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Dir, Business Partner	Payroll Deduction: (22.22- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.30	

Full Name (Last, First, Middle Initial) C. Michael Harris		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006
Mailing Address 2254 W Wolfram St		Transaction ID: 60815.C75005
City State Zip Code Chicago IL 60618	Amount of Each Receipt this Period 28.38	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Vp, Supply Chain	Payroll Deduction: (14.19- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.85	

SUBTOTAL of Receipts This Page (optional) ▶	131.34
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Mark Hartman		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 7677 Tartan Fields Dr		Transaction ID: 60815.C75211	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 177.40		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Evp, Corp Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1330.50		
		Payroll Deduction: (88.70- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Linda Harty		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 1761 Roxbury Rd		Transaction ID: 60815.C74980	
City State Zip Code Columbus OH 43212	Amount of Each Receipt this Period 206.90		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Treasurer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1551.75		
		Payroll Deduction: (103.4- 5/Pay Period)	

Full Name (Last, First, Middle Initial) C. Richard Heard		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 415 Misty Manor		Transaction ID: 60815.C75091	
City State Zip Code Houston TX 77094	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Ips Health Systems		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		
		Payroll Deduction: (25.00- /Pay Period)	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. James Hethcox		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 5442 Haverhill Drive		Transaction ID: 60815.C75113
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 65.38
Name of Employer Cardinal Health, Inc	Occupation Is Medication Executive, Ips	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.35	Payroll Deduction: (32.69- /Pay Period)

Full Name (Last, First, Middle Initial) B. Robin Hoke		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 2134 Yorkshire Road		Transaction ID: 60815.C75123
City Columbus	State OH	Zip Code 43221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 79.12
Name of Employer Cardinal Health, Inc	Occupation Svp, Strategic Initiatives	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 591.64	Payroll Deduction: (39.56- /Pay Period)

Full Name (Last, First, Middle Initial) C. John Howard		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 305 Vine Ct		Transaction ID: 60815.C75017
City Mandeville	State LA	Zip Code 70448
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Cardinal Health, Inc	Occupation Cnslt, Franchise Business	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	Payroll Deduction: (15.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	174.50
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Stephen Inacker		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 1490 S Ridge Rd		Transaction ID: 60815.C75094
City Lake Forest	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.36
Name of Employer Cardinal Health, Inc	Occupation Pres, Hosp Supply Dist	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 377.70	Payroll Deduction: (25.18- /Pay Period)

Full Name (Last, First, Middle Initial) B. Brian Jackson		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 9055 Tartan Flds Dr		Transaction ID: 60815.C75028
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.00
Name of Employer Cardinal Health, Inc	Occupation Svp, Ips Sales Operations	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	Payroll Deduction: (16.00- /Pay Period)

Full Name (Last, First, Middle Initial) C. Renard Jackson		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 744 Tennis Ave		Transaction ID: 60815.C75060
City Ambler	State PA	Zip Code 19002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.18
Name of Employer Cardinal Health, Inc	Occupation Evp, Packaging - Contract	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.35	Payroll Deduction: (20.09- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	122.54
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Gregory Johansen		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006
Mailing Address 3650 Grand Ave		Transaction ID: 60815.C75019
City State Zip Code W Des Moines IA 50265	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Pharmacy Solutions	Payroll Deduction: (15.00- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Stephen Johnson		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006
Mailing Address 360 Ormond St Se		Transaction ID: 60815.C75099
City State Zip Code Atlanta GA 30315	Amount of Each Receipt this Period 52.52	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Distribution Srvc	Payroll Deduction: (26.26- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 393.90	

Full Name (Last, First, Middle Initial) C. Remi Kajogbola		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006
Mailing Address 15751 Sheridan St #149		Transaction ID: 60815.C75148
City State Zip Code Fort Lauderdale FL 33331	Amount of Each Receipt this Period 49.87	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Rvp, Corporate Solutions	Payroll Deduction: (49.87- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 698.18	

SUBTOTAL of Receipts This Page (optional) ▶	132.39
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Remi Kajogbola		Date of Receipt M M / D D / Y Y Y Y Y 07 / 21 / 2006	
Mailing Address 15751 Sheridan St #149		Transaction ID: 60815.C75494	
City State Zip Code Fort Lauderdale FL 33331	Amount of Each Receipt this Period 54.81		
FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (54.81- /Pay Period)		
Name of Employer Cardinal Health, Inc	Occupation Rvp, Corporate Solutions		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 752.99		

Full Name (Last, First, Middle Initial) B. Michael Kennedy		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 4783 Vista Ridge Dr		Transaction ID: 60815.C75102	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 55.74		
FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (27.87- /Pay Period)		
Name of Employer Cardinal Health, Inc	Occupation Svp & General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 418.05		

Full Name (Last, First, Middle Initial) C. Steven Koester		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 2122 Autumn Wood Dr		Transaction ID: 60815.C75020	
City State Zip Code St Charles MO 63303	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (15.00- /Pay Period)		
Name of Employer Cardinal Health, Inc	Occupation Dir, Operations - Ellipticare		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional) ▶	140.55
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) Fred Kohut		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 824 Interlaken Lane		Transaction ID: 60815.C75015	
City State Zip Code Libertyville IL 60048	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Sales	Payroll Deduction: (15.00- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

B. Full Name (Last, First, Middle Initial) Michael Kopp		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 4050 Whispering Pines Court		Transaction ID: 60815.C75095	
City State Zip Code Suwanee GA 30024	Amount of Each Receipt this Period 50.76		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Business Development	Payroll Deduction: (25.38- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.70		

C. Full Name (Last, First, Middle Initial) Joseph Kubicek		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 443 Douglas		Transaction ID: 60815.C75087	
City State Zip Code Lake Forest IL 60045	Amount of Each Receipt this Period 49.18		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Finance	Payroll Deduction: (24.59- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 366.07		

SUBTOTAL of Receipts This Page (optional) ▶	129.94
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) Ronald Labrum Mailing Address 1325 Canterbury Cir City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006 Transaction ID: 60815.C74990 Amount of Each Receipt this Period 232.00 Receipt Payroll Deduction: (116.0-0/Pay Period)
Name of Employer Cardinal Health, Inc Occupation Chmn/ceo, Supply Chain Srvcs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1740.00		

B. Full Name (Last, First, Middle Initial) Frank Lafasto Mailing Address 1451 S Kurtis Lane City State Zip Code Lake Forest IL 60045 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006 Transaction ID: 60815.C74997 Amount of Each Receipt this Period 246.08 Receipt Payroll Deduction: (123.0-4/Pay Period)
Name of Employer Cardinal Health, Inc Occupation Svp, Org Effectiveness Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1845.60		

C. Full Name (Last, First, Middle Initial) Jeanne Lasheff Mailing Address 220 W Lincoln Ave City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006 Transaction ID: 60815.C75007 Amount of Each Receipt this Period 28.62 Receipt Payroll Deduction: (14.31-/Pay Period)
Name of Employer Cardinal Health, Inc Occupation Vp, Eit Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 214.65		

SUBTOTAL of Receipts This Page (optional)	506.70
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Clay Lassiter		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 2023 Cannonbury Lane		Transaction ID: 60815.C75085	
City Richmond	State TX	Zip Code 77469	Amount of Each Receipt this Period 24.12
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Dir, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 328.04		
		Payroll Deduction: (24.12- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Clay Lassiter		Date of Receipt M M / D D / Y Y Y Y Y 07 / 21 / 2006	
Mailing Address 2023 Cannonbury Lane		Transaction ID: 60815.C75349	
City Richmond	State TX	Zip Code 77469	Amount of Each Receipt this Period 19.30
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Dir, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 347.34		
		Payroll Deduction: (19.30- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Steve Lawrence		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 4868 Carrigan Ridge		Transaction ID: 60815.C75147	
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 99.66
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Retail Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 747.45		
		Payroll Deduction: (49.83- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	143.08
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. James Leitl		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 95 Arboretum Dr		Transaction ID: 60815.C75037	
City North Barrington	State IL	Zip Code 60010	Amount of Each Receipt this Period 39.42
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp/gm, V Mueller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.01		
		Payroll Deduction: (19.71- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Michael Lynch		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 550 E Rosemary		Transaction ID: 60815.C75013	
City Lake Forest	State IL	Zip Code 60045	Amount of Each Receipt this Period 149.28
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Group Pres, Mfg		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2089.92		
		Payroll Deduction: (149.2- 8/Pay Period)	

Full Name (Last, First, Middle Initial) C. Michael Lynch		Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2006	
Mailing Address 550 E Rosemary		Transaction ID: 60815.C75335	
City Lake Forest	State IL	Zip Code 60045	Amount of Each Receipt this Period 155.41
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Group Pres, Mfg		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2245.33		
		Payroll Deduction: (155.4- 1/Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	344.11
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Donna Mann		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 6666 Mcvey Blvd		Transaction ID: 60815.C75079	
City State Zip Code West Worthington OH 43235	Amount of Each Receipt this Period 42.30		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Dir, Hr Svc Delivery/transform		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.28		
		Payroll Deduction: (21.15- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Samuel Manzanares		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 1205 Brown Ridge		Transaction ID: 60815.C74907	
City State Zip Code El Paso TX 79912	Amount of Each Receipt this Period -53.85		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Vp, Qlty Ops		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 610.00		
		Payroll Deduction: (-53.8- 5/Pay Period)	

Full Name (Last, First, Middle Initial) C. Samuel Manzanares		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 1205 Brown Ridge		Transaction ID: 60815.C75182	
City State Zip Code El Paso TX 79912	Amount of Each Receipt this Period 161.55		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Vp, Qlty Ops		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 771.55		
		Payroll Deduction: (53.85- /Pay Period)	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Robin Martial		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 1741 Haggin Grove W		Transaction ID: 60815.C75075	
City State Zip Code Carmichael CA 95608	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Evp, Sales & Mktg- Hlth Sy		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		Payroll Deduction: (20.00- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Janice Mccampbell		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 8001 Millenium Drive		Transaction ID: 60815.C75083	
City State Zip Code Raleigh NC 27614	Amount of Each Receipt this Period 22.10		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Dir, Engineering - Disposables		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.61		
		Payroll Deduction: (22.10- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Janice Mccampbell		Date of Receipt M M / D D / Y Y Y Y Y 07 / 21 / 2006	
Mailing Address 8001 Millenium Drive		Transaction ID: 60815.C75341	
City State Zip Code Raleigh NC 27614	Amount of Each Receipt this Period 16.58		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Dir, Engineering - Disposables		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 359.19		
		Payroll Deduction: (16.58- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	78.68
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) Lindy Mclean Mailing Address 7272 Black Abbey Ct City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006 Transaction ID: 60815.C75112 Amount of Each Receipt this Period 61.28 Receipt Payroll Deduction: (30.64- /Pay Period)
Name of Employer Cardinal Health, Inc Occupation Mgr, Key Account Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 459.60		

B. Full Name (Last, First, Middle Initial) Bruce Mcwhinney Mailing Address 205 Presque Isle Ln City State Zip Code Chapel Hill NC 27514 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006 Transaction ID: 60815.C75066 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
Name of Employer Cardinal Health, Inc Occupation Svp, Center Med Safe/cln Imprv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

C. Full Name (Last, First, Middle Initial) Jose Mejorado Mailing Address 7656 Dianjou Dr. City State Zip Code El Paso TX 79912 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006 Transaction ID: 60815.C75011 Amount of Each Receipt this Period 14.88 Receipt Payroll Deduction: (14.88- /Pay Period)
Name of Employer Cardinal Health, Inc Occupation Vp, Mfg Convertors Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 401.76		

SUBTOTAL of Receipts This Page (optional)	116.16
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Jose Mejorado		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 7656 Dianjou Dr.		Transaction ID: 60815.C75195	
City El Paso	State TX	Zip Code 79912	Amount of Each Receipt this Period 66.97
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Mfg Convertors		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.73		
		Payroll Deduction: (66.97- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Steven Merkin		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 1481 Country Ln		Transaction ID: 60815.C75142	
City Deerfield	State IL	Zip Code 60015	Amount of Each Receipt this Period 80.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Hr Business Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		
		Payroll Deduction: (40.00- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Mark Mitchell		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 6604 Cresent Lake Dr		Transaction ID: 60815.C75114	
City Lakeland	State FL	Zip Code 33813	Amount of Each Receipt this Period 68.08
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Health Systems - Group		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 493.70		
		Payroll Deduction: (34.04- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	215.05
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Robert Myers		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address Po Box 230 Cardinal (mps) Expat		Transaction ID: 60815.C75216	
City State Zip Code Waukegan IL 60079		Amount of Each Receipt this Period 193.64	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc Occupation Gmd & Ceo, Singapore		Payroll Deduction: (96.82- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1452.30	

Full Name (Last, First, Middle Initial) B. Frederick Nelson		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 7303 Deacon Court		Transaction ID: 60815.C75117	
City State Zip Code Dublin OH 43017		Amount of Each Receipt this Period 72.02	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc Occupation Vp, Integrated Services		Payroll Deduction: (36.01- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 540.15	

Full Name (Last, First, Middle Initial) C. Michael Orscheln		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 601 Buckingham Pl		Transaction ID: 60815.C75072	
City State Zip Code Libertyville IL 60048		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc Occupation Vp/gm, Ambulatory Care		Payroll Deduction: (20.00- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Mark Overman		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 900 Wyndham Hill Ct		Transaction ID: 60815.C75024	
City State Zip Code Southlake TX 76092	Amount of Each Receipt this Period 31.06		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Vp, Hlth Sys		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.95		
		Payroll Deduction: (15.53- /Pay Period)	

Full Name (Last, First, Middle Initial) B. William Owad		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 7558 Heatherwood Ln		Transaction ID: 60815.C75198	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 155.76		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Svp, Operational Excellence		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1168.20		
		Payroll Deduction: (77.88- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Joseph Papa		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address One Deerhill Rd		Transaction ID: 60815.C74981	
City State Zip Code Chester NJ 07930	Amount of Each Receipt this Period 215.46		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Chairman/ceo, Pts		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1615.95		
		Payroll Deduction: (107.7- 3/Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	402.28
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Donald Patterson		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 19463 West 52nd Dr.		Transaction ID: 60815.C75001	
City State Zip Code Golden CO 80403	Amount of Each Receipt this Period 26.90		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Dir, Technical		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.75		
		Payroll Deduction: (13.45- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Thomas Perrine		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 7249 Landon Lane		Transaction ID: 60815.C75069	
City State Zip Code New Albany OH 43054	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Enterprise It		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		Payroll Deduction: (20.00- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Kevin Peters		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 465 Fourth Fairway Drive		Transaction ID: 60815.C75146	
City State Zip Code Roswell GA 30076	Amount of Each Receipt this Period 97.70		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Evp, Ips Sales Se		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 719.36		
		Payroll Deduction: (48.85- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	164.60
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. William Peters		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006
Mailing Address 1532 Lost Lake Drive Drive		Transaction ID: 60815.C75031
City State Zip Code Keller TX 76248	Amount of Each Receipt this Period 35.58	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Rvp, Distribution	Payroll Deduction: (17.79- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.85	

Full Name (Last, First, Middle Initial) B. William Peters		Date of Receipt M M / D D / Y Y Y Y Y 07 / 21 / 2006
Mailing Address 1532 Lost Lake Drive Drive		Transaction ID: 60815.C75217
City State Zip Code Keller TX 76248	Amount of Each Receipt this Period -53.37	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Rvp, Distribution	Payroll Deduction: (-53.3- 7/Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.48	

Full Name (Last, First, Middle Initial) C. William Peters		Date of Receipt M M / D D / Y Y Y Y Y 07 / 21 / 2006
Mailing Address 1532 Lost Lake Drive Drive		Transaction ID: 60815.C75218
City State Zip Code Keller TX 76248	Amount of Each Receipt this Period 53.37	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Rvp, Distribution	Payroll Deduction: (53.37- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.85	

SUBTOTAL of Receipts This Page (optional) ▶	35.58
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Aaron Pitts		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 5014 Closeburn Ct		Transaction ID: 60815.C75002
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.92
Name of Employer Cardinal Health, Inc	Occupation Vp, Strategy & Bus Develop	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.90	Payroll Deduction: (13.46- /Pay Period)

Full Name (Last, First, Middle Initial) B. George Plava		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 3526 Pembroke Dr		Transaction ID: 60815.C75194
City Richmond	State TX	Zip Code 77469
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 131.60
Name of Employer Cardinal Health, Inc	Occupation Pres, Pharmacy Management	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 987.00	Payroll Deduction: (65.80- /Pay Period)

Full Name (Last, First, Middle Initial) C. Kathy Popejoy		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 11127 W 59th Ave		Transaction ID: 60815.C75059
City Arvada	State CO	Zip Code 80004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.14
Name of Employer Cardinal Health, Inc	Occupation Mgr, Region Ops B	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.05	Payroll Deduction: (20.07- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	198.66
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. William Rampy		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 103 Foxglove Ln		Transaction ID: 60815.C75179	
City State Zip Code Bentonville AR 72712	Amount of Each Receipt this Period 100.96		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Svp, Franchise Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 555.28		
		Payroll Deduction: (50.48- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Stephen Reardon		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 5078 Breckenhurst Dr		Transaction ID: 60815.C75062	
City State Zip Code Hilliard OH 43026	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Vp, Quality		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		Payroll Deduction: (20.00- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Cynthia Rhomberg		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 9379 Redan Court		Transaction ID: 60815.C75068	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Vp, Corp Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		Payroll Deduction: (20.00- /Pay Period)	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Sandra Rigopoulos		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 307 S Hi Lusi Ave		Transaction ID: 60815.C75207
City Mt Prospect	State IL	Zip Code 60056
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 166.20
Name of Employer Cardinal Health, Inc	Occupation Vp, Vendor Mgmt & Admin	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1246.50	Payroll Deduction: (83.10- /Pay Period)

Full Name (Last, First, Middle Initial) B. Mark Rosenbaum		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 6565 Lockhart Lane		Transaction ID: 60815.C75012
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 286.62
Name of Employer Cardinal Health, Inc	Occupation Pres, Ips Sales	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2149.65	Payroll Deduction: (143.3- 1/Pay Period)

Full Name (Last, First, Middle Initial) C. Claudia Russell		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 5064 Seagrove Cove		Transaction ID: 60815.C75143
City San Diego	State CA	Zip Code 92130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.87
Name of Employer Cardinal Health, Inc	Occupation Vp, Mktg - Strategic	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 551.74	Payroll Deduction: (40.87- /Pay Period)

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Claudia Russell		Date of Receipt M M / D D / Y Y Y Y Y 07 / 21 / 2006	
Mailing Address 5064 Seagrove Cove		Transaction ID: 60815.C75340	
City State Zip Code San Diego CA 92130	Amount of Each Receipt this Period 16.35		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Mktg - Strategic		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 568.09		
		Payroll Deduction: (16.35- /Pay Period)	

Full Name (Last, First, Middle Initial) B. James Saponaro		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 9392 Redan Court		Transaction ID: 60815.C75210	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 173.16		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Business Units- Retail		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1298.70		
		Payroll Deduction: (86.58- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Richard Schindewolf		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 6507 Burning Tree		Transaction ID: 60815.C75111	
City State Zip Code Mchenry IL 60050	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Gm		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		
		Payroll Deduction: (30.00- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	249.51
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. David Schlotterbeck		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 12 Hermitage Lane		Transaction ID: 60815.C74979	
City Laguna Niguel	State CA	Zip Code 92677	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Pres/ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		
		Payroll Deduction: (100.0-0/Pay Period)	

Full Name (Last, First, Middle Initial) B. Douglas Schmidt		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 31145 Reigate Ln		Transaction ID: 60815.C75023	
City Green Oaks	State IL	Zip Code 60048	Amount of Each Receipt this Period 15.47
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Neuro/spine & Int&apos		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.58		
		Payroll Deduction: (15.47-/Pay Period)	

Full Name (Last, First, Middle Initial) C. Douglas Schmidt		Date of Receipt M M / D D / Y Y Y Y Y 07 / 21 / 2006	
Mailing Address 31145 Reigate Ln		Transaction ID: 60815.C75219	
City Green Oaks	State IL	Zip Code 60048	Amount of Each Receipt this Period 0.59
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Neuro/spine & Int&apos		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.17		
		Payroll Deduction: (0.59-/Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	216.06
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Douglas Schmidt		Date of Receipt MM / DD / YYYY 07 / 21 / 2006
Mailing Address 31145 Reigate Ln		Transaction ID: 60815.C75337
City Green Oaks	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.06
Name of Employer Cardinal Health, Inc	Occupation Vp, Neuro/spine & Int's	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.23	Payroll Deduction: (16.06- /Pay Period)

Full Name (Last, First, Middle Initial) B. Michael Scrase		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 8358 Davington		Transaction ID: 60815.C75100
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 53.04
Name of Employer Cardinal Health, Inc	Occupation Dir, Vendor Management	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 397.80	Payroll Deduction: (26.52- /Pay Period)

Full Name (Last, First, Middle Initial) C. Frank Segrave		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 5371 Gordon Way		Transaction ID: 60815.C75071
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Cardinal Health, Inc	Occupation Svp, Purchasing	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Payroll Deduction: (20.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	109.10
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Steven Seide		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 30 Nutmeg Ln		Transaction ID: 60815.C75022	
City State Zip Code North Andover MA 01845	Amount of Each Receipt this Period 30.28		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Vp, Reg Ambulatory Care		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.10		
		Payroll Deduction: (15.14- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Kendell Sherrer		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 7720 Heatherwood Ln		Transaction ID: 60815.C75077	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 40.22		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Vp, Hr Business Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.65		
		Payroll Deduction: (20.11- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Jesse Sims		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 11014 Black Falls Ct		Transaction ID: 60815.C75177	
City State Zip Code Sugar Land TX 77478	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Cardinal Health, Inc	Occupation Mgr, Service - Technical		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		
		Payroll Deduction: (50.00- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	170.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Thomas Slagle		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 1340 Kimmer Ct		Transaction ID: 60815.C75014	
City State Zip Code Lake Forest IL 60045	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Group Pres, Dist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		
		Payroll Deduction: (15.00- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Douglas Smith		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 544 Restoration Dr		Transaction ID: 60815.C75008	
City State Zip Code Marysville OH 43040	Amount of Each Receipt this Period 28.84		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Spec, Security		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.30		
		Payroll Deduction: (14.42- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Jake St. Philip		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 4727 Plummer Court		Transaction ID: 60815.C75070	
City State Zip Code San Diego CA 92130	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Evp, Ips Sales West		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		Payroll Deduction: (20.00- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	98.84
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Cornell Stamoran		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006
Mailing Address 3 Matrick Court		Transaction ID: 60815.C75193
City Hillsborough	State NJ	Zip Code 08844
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 129.24
Name of Employer Cardinal Health, Inc	Occupation Vp, Strategic Intel & Plan	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 969.30	Payroll Deduction: (64.62- /Pay Period)

Full Name (Last, First, Middle Initial) B. Mark Stauffer		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006
Mailing Address 10644 Dundee Ct		Transaction ID: 60815.C75181
City Powell	State OH	Zip Code 43065
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 102.72
Name of Employer Cardinal Health, Inc	Occupation Svp, Audit	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 770.40	Payroll Deduction: (51.36- /Pay Period)

Full Name (Last, First, Middle Initial) C. Meriann Stockwell		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006
Mailing Address 105 16th Street		Transaction ID: 60815.C75034
City Belleair Beach	State FL	Zip Code 33786
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.36
Name of Employer Cardinal Health, Inc	Occupation Dir, Gbl Strat Procurement	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 287.70	Payroll Deduction: (19.18- /Pay Period)

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Greg Storm		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 7703 E 85th St		Transaction ID: 60815.C74994	
City State Zip Code Tulsa OK 74133	Amount of Each Receipt this Period 25.38		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Mgr, Proc Supply Chain Solutns		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 287.59		
		Payroll Deduction: (12.69- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Joseph Strack		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 29420 Cambridge Ct		Transaction ID: 60815.C75118	
City State Zip Code Agoura Hills CA 91301	Amount of Each Receipt this Period 74.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Rvp, Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 555.00		
		Payroll Deduction: (37.00- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Thomas Stuart		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 2 Jonah Ct Po Box 615		Transaction ID: 60815.C75116	
City State Zip Code Peapack NJ 07977	Amount of Each Receipt this Period 70.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Pres, Oral Technologies		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00		
		Payroll Deduction: (35.00- /Pay Period)	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 / 63
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Robert Summers		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 146 Chasely Circle		Transaction ID: 60815.C75088	
City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 49.24		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Sales - Healthsystems		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 369.30		
		Payroll Deduction: (24.62- /Pay Period)	

Full Name (Last, First, Middle Initial) B. Mary Jane Tew		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 6315 Duffy Rd		Transaction ID: 60815.C75093	
City State Zip Code Delaware OH 43015	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Sales - Admin		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		
		Payroll Deduction: (25.00- /Pay Period)	

Full Name (Last, First, Middle Initial) C. Ethan Trull		Date of Receipt M M / D D / Y Y Y Y Y 07 / 07 / 2006	
Mailing Address 2663 Marl Oak Dr		Transaction ID: 60815.C75029	
City State Zip Code Highland Park IL 60035	Amount of Each Receipt this Period 32.48		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Counsel, Asst General		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.60		
		Payroll Deduction: (16.24- /Pay Period)	

SUBTOTAL of Receipts This Page (optional) ▶	131.72
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Richard Walsh		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 8722 Sweetwater Ct		Transaction ID: 60815.C75121	
City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 76.12		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Flight Ops/bus Cont	Payroll Deduction: (38.06- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 570.90		

Full Name (Last, First, Middle Initial) B. Robert Walter		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address C/o Cardinal Health 7000 Cardinal Place		Transaction ID: 60815.C75039	
City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 384.04		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Chairman	Payroll Deduction: (192.0- 2/Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2880.30		

Full Name (Last, First, Middle Initial) C. Carole Watkins		Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2006	
Mailing Address 1967 Woodlands Place		Transaction ID: 60815.C75141	
City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Evp, Human Resources	Payroll Deduction: (40.00- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional) ▶	540.16
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Curt Witte		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 6724 Perimeter Loop Rd #232		Transaction ID: 60815.C75209
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 171.28
Name of Employer Cardinal Health, Inc	Occupation Svp, Mktg - Alt Care	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1284.60	Payroll Deduction: (85.64- /Pay Period)

Full Name (Last, First, Middle Initial) B. Deborah Wolin		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 44 Lake Mist Drive		Transaction ID: 60815.C75065
City Sugar Land	State TX	Zip Code 77479
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Cardinal Health, Inc	Occupation Counsel, Sr	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Payroll Deduction: (20.00- /Pay Period)

Full Name (Last, First, Middle Initial) C. Connie Woodburn		Date of Receipt MM / DD / YYYY 07 / 07 / 2006
Mailing Address 9761 Erin Woods Dr		Transaction ID: 60815.C74998
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 246.82
Name of Employer Cardinal Health, Inc	Occupation Svp, Prof & Gov't Rel	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1851.15	Payroll Deduction: (123.4- 1/Pay Period)

SUBTOTAL of Receipts This Page (optional)	458.10
TOTAL This Period (last page this line number only)	10483.25

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 56 / 63	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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

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

Mailing Address Po Box 75000 (mc 2250)

City State Zip Code
 Detroit MI 48275-2250

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Bank

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 /

Transaction ID: 60719.C74905

Amount of Each Receipt this Period

Interest Received

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1020.56"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1020.56"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Bean for Congress		Transaction ID: 60719.E756 Date of Disbursement 07 / 13 / 2006	
Mailing Address 426 C Street, NE		Amount of Each Disbursement this Period 2000.00	
City Washington State DC Zip Code 20002-	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type	
Candidate Name MELISSA LUBURICH BEAN		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 08		

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial) B. Alot of People Who Support Jeff Bingaman		Transaction ID: 072120060E762 Date of Disbursement 07 / 20 / 2006	
Mailing Address 110-B East Broad Street		Amount of Each Disbursement this Period 2000.00	
City Falls Church State VA Zip Code 22046-	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type	
Candidate Name JEFF BINGAMAN		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NM District: 00		

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial) C. Friends of Roy Blunt		Transaction ID: 60719.E758 Date of Disbursement 07 / 17 / 2006	
Mailing Address 209 Pennsylvania Avenue, SE		Amount of Each Disbursement this Period 5000.00	
City Washington State DC Zip Code 20003-	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type	
Candidate Name ROY BLUNT		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 07		

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ▶	9000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Friends of Lois Capps		Transaction ID: 60719.E757 Date of Disbursement 07 / 13 / 2006
Mailing Address 38 Ivy Street, SE		Amount of Each Disbursement this Period 2000.00 DIRECT CONTRIBUTION
City Washington State DC Zip Code 20003-	Purpose of Disbursement DIRECT CONTRIBUTION	
Candidate Name LOIS G CAPPS	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 23	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Nathan Deal for Congress		Transaction ID: 60719.E759 Date of Disbursement 07 / 17 / 2006
Mailing Address P.O. Box 16021		Amount of Each Disbursement this Period 2000.00 DIRECT CONTRIBUTION
City Alexandria State VA Zip Code 22302-	Purpose of Disbursement DIRECT CONTRIBUTION	
Candidate Name NATHAN DEAL	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 9	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mike Dewine for U.S. Senate		Transaction ID: 60815.E764 Date of Disbursement 07 / 24 / 2006
Mailing Address P.O. Box 340188		Amount of Each Disbursement this Period 5000.00 DIRECT CONTRIBUTION
City Columbus State OH Zip Code 43234-	Purpose of Disbursement DIRECT CONTRIBUTION	
Candidate Name RICHARD MICHAEL DEWINE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	9000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Eshoo for Congress		Transaction ID: 60815.E765 Date of Disbursement 07 / 24 / 2006
Mailing Address P.O. Box 636		Amount of Each Disbursement this Period 2000.00
City Annandale State VA Zip Code 22003-	Purpose of Disbursement DIRECT CONTRIBUTION	
Candidate Name ANNA ESHOO		DIRECT CONTRIBUTION
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 14	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Blanche Lincoln		Transaction ID: 072120060E760 Date of Disbursement 07 / 20 / 2006
Mailing Address 301 4th Street, NW 27th Floor		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20002-	Purpose of Disbursement DIRECT CONTRIBUTION	
Candidate Name BLANCHE LAMBERT LINCOLN		DIRECT CONTRIBUTION
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Rogers for Congress		Transaction ID: 60719.E753 Date of Disbursement 07 / 06 / 2006
Mailing Address P.O. Box 581		Amount of Each Disbursement this Period 2000.00
City Brighton State MI Zip Code 48116-	Purpose of Disbursement DIRECT CONTRIBUTION	
Candidate Name MICHAEL J ROGERS		DIRECT CONTRIBUTION
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 61 / 63

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

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

Full Name (Last, First, Middle Initial) A. Schwartz for Congress		Transaction ID: 60815.E766 Date of Disbursement 07 / 26 / 2006	
Mailing Address 38 Ivy Street, SE		Amount of Each Disbursement this Period 1000.00	
City Washington	State DC	Zip Code 20003-	Category/ Type DIRECT CONTRIBUTION
Purpose of Disbursement DIRECT CONTRIBUTION			
Candidate Name ALLYSON SCHWARTZ			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

25000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Ohioans for Blackwell		Transaction ID: 60719.E755 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 0 / 2 0 0 6
Mailing Address 172 E. State Street Suite 203		Amount of Each Disbursement this Period 1000.00
City Columbus State OH Zip Code 43215-	Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Citizens for Buehrer		Transaction ID: 60719.E754 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 0 / 2 0 0 6
Mailing Address 704 Greeniew Drive		Amount of Each Disbursement this Period 500.00
City Delta State OH Zip Code 43515-	Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Friends of Todd Eachus		Transaction ID: 072120060E761 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 6
Mailing Address P.O. Box 2174		Amount of Each Disbursement this Period 500.00
City Hazleton State PA Zip Code 18201-	Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 63 / 63

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

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

Full Name (Last, First, Middle Initial) A. Strickland for Governor		Transaction ID: 60815.E767 Date of Disbursement																					
Mailing Address P.O. Box 15055		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		3	1		2	0	0	6														
City Columbus	State OH	Zip Code 43215-																					
Purpose of Disbursement DIRECT CONTRIBUTION		Amount of Each Disbursement this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00																			
1000.00																							
Candidate Name		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State:	District:																						

SUBTOTAL of Disbursements This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	3000.00