

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

ADDRESS (number and street) 7000 Cardinal Place
Dublin OH 43017
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C 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 Year-End 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 (12S)
Election on M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 09 / 01 / 2016 through 09 / 30 / 2016

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

Signature of Treasurer Baker, Cassi, , , [Electronically Filed] Date 10 / 13 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		240043.49
(b) Cash on Hand at Beginning of Reporting Period.....	126002.58	
(c) Total Receipts (from Line 19)	36640.54	356088.63
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	162643.12	596132.12
7. Total Disbursements (from Line 31).....	29500.00	462989.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	133143.12	133143.12
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
09 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	30019.48	200777.31
(ii) Unitemized	6621.06	155206.14
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	36640.54	355983.45
(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)	36640.54	355983.45
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.).....	0.00	105.18
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	36640.54	356088.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	36640.54	356088.63

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	39.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	39.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	23000.00	355500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	6500.00	107450.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	29500.00	462989.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29500.00	462989.00

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)	36640.54	355983.45
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	36640.54	355983.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	39.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	39.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Eden, Kristina L, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 10886 State Route 287			Transaction ID : PR10055325270
City Zanesfield	State OH	Zip Code 43360	Amount of Each Receipt this Period 38.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Sr Asst, Administration	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Snow, Ola M, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 267 Donerail Ave			Transaction ID : PR100553425270
City Powell	State OH	Zip Code 43065	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) SVP, Human Resources	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Pitts, Rosemary, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 8673 Finlarig Dr.			Transaction ID : PR118725325270
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 76.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Strat Plng/Execution	P/R Deduction (\$38.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 722.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Clerico, Ronald J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 485 Trillium Drive
 City Galloway State OH Zip Code 43119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR118725425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Hamlin, Mary L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 Ashley Ct
 City Washington State MO Zip Code 63090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Territory Sales - Dist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR120659525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Ballay, Katherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7531 Bardston Drive
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Comm Business Partner
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR120659625270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Putnam, William C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7812 W. 147th Terrace
 City Overland Park State KS Zip Code 66223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP GM, Regulatory Sciences
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR120659925270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. NEGRON SEGARRA, FRANCISCO J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2900 CARR 834 APTDO 4050
 City GUAYNABO State PR Zip Code 00971
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, OPERATIONS MANAG
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR120660025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Roepken, Lori J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1402 Wheeler Dr
 City Mansfield State TX Zip Code 76063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Inventory Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR120669725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Grossi, Therese, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17211 Willow Rdge CT
 City Northville State MI Zip Code 48168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Enterprise Contracting
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR120669825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. House, Timothy W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5920 Gainey Court
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Account Mg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR120669925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Olson, Tiffany P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15402 Hidden Oaks Lane
 City Carmel State IN Zip Code 46033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) President, Nuclear Pharmacy Serv
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3653.70

Date of Receipt 09 / 30 / 2016
Transaction ID : PR120670125270
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Gurushankar, Guru, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6188 Memorial Drive
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR120701225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Thevenot, Reginald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 Dustin Court
 City Mansfield State MA Zip Code 02048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR122694725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Fullenkamp, Richard G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8975 Portofino Place
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Rgltry Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR122694825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Sevin, Dennis W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1342 White Oak Ct.
 City North Huntingdon State PA Zip Code 15642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Director, Eniv H&S
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR122779725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Norris, Stephen S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 King Ct
 City Bullard State TX Zip Code 75757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Manufacturing Mgt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR122779925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Prescod, Garvin P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 Braebank Ln
 City Bryn Mawr State PA Zip Code 19010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Director, Eniv H&S
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR122787625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Ferrang, Jennifer R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Cardinal Health
 100 Raritan Center Parkway
 City Lebanon State NJ Zip Code 08833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Direct Sls Mgmt
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **722.00**

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR122787725270
 Amount of Each Receipt this Period **76.00**
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Wagner, Scott J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7504 Breezy Lake Lane
 City Flowery Branch State GA Zip Code 30542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Transprtation
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **722.00**

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR124937425270
 Amount of Each Receipt this Period **76.00**
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Easterling, Jeffrey J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 965 Wessington Manor Lane
 City Fort Mill State SC Zip Code 29715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Sales (Enterprise Contractin
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **570.00**

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR124937525270
 Amount of Each Receipt this Period **60.00**
 Memo Item
 P/R Deduction (\$30.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Neese, Theron B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4855 Spring Park Cir
 City Suwanne State GA Zip Code 30024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Accnt Mngmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR124937625270
 Amount of Each Receipt this Period
 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Gates, Michael A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1212 Brionne Court
 City Waxhaw State NC Zip Code 28173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 730.74

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR124937825270
 Amount of Each Receipt this Period
 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. Cox, Ryan K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 639 NW Fremont St
 City Camas State WA Zip Code 98607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Territory Sales (Lab)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR124937925270
 Amount of Each Receipt this Period
 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	228.92
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 179
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Mason, Stephen M, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016		
Mailing Address 6544 Brodie Blvd			Transaction ID : PR124938025270		
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 38.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Pres, Cardinal Health at Home	P/R Deduction (\$19.00 Bi-Weekly)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 361.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wagner, Robert D, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016		
Mailing Address 8844 Tartan Fields Drive			Transaction ID : PR124938125270		
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 76.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Strat Src Natl Brands	P/R Deduction (\$38.00 Bi-Weekly)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 722.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hula-Mills, Nancy, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016		
Mailing Address 8581 The Island			Transaction ID : PR124938425270		
City Memphis	State TN	Zip Code 38125	Amount of Each Receipt this Period 76.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Sales (Enterprise Contractin	P/R Deduction (\$38.00 Bi-Weekly)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 722.00			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 179														
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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

A. Garcia, Luis E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5263 SW 152 Avenue
 City Miramar State FL Zip Code 33027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Nuclear Pharmacy
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR124938525270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Stelter, Daniel C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 N GARLAND CT APT 4902
 City Chicago State IL Zip Code 60602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Intell Prprty (Atty)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR124938625270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Grunwald, Stefan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9982 Allen Drive
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Strategic Src Natl Brands
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR124938725270
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 182.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Taylor, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1835 Glenn Avenue
 City Upper Arlington State OH Zip Code 43212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124938825270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Friedauer, Max J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1554 Heatherwae Loop
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Strtegic Pricing
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124938925270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

C. Zimpfer, David T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6916 Corazon Drive
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Info Services & Analytics
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124939025270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Schultz, Ronald A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1209 East Cork Street
 City Kalamazoo State MI Zip Code 49001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Quality Assurance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124939125270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Godat, Helene U, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3601 Harvard Ave
 City Highland Park State TX Zip Code 75205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124939325270
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

C. Davidson, Cynthia M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1350 N. Western Ave #103
 City Lake Forest State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Sales Operations Mgt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124983725270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Sanford, Steven B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 905 CR 3131
 City Jacksonville State TX Zip Code 75766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Manufacturing_Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR124983825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Butterfield, Stacy A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5151 Woodbridge Dr
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Fin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR124984225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Kilgour, John W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 764
 43 Fellows Rd.
 City Ipswich State MA Zip Code 01938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Direct Sis Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR124984425270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Stormer, Benjamin E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 498 Greenglade Avenue
 City Worthington State OH Zip Code 43085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Technical Marketing
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124984525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Mitchell, Mark S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 76 Tranquil Trail
 City Dunlap State TN Zip Code 37327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Territory Sales - Dist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124984625270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Stentz, Teresa A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2249 Sheringham Road
 City Upper Arlington State OH Zip Code 43220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Invntry Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124984925270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Adkins, Cynthia L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8508 Westover Drive
 City Prospect State KY Zip Code 40059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Strategic Plng/Execut
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124985125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Stutz, Brent E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8176 Crossgate Court N
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Commercial Technologies
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124985225270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Barnett, James E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7657 Kestrel Way W
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Asc Gen Cnsl, Corp/Secur
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124985325270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Bennett, Jeffrey R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2266 Dauer Court
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Genrl Counsel
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124985425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Lewis, Aaron R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 175 Coachman Dr
 City Plain City State OH Zip Code 43064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Compliance Bus Partner
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124985625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Conway, Michele L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4902 Longbenton Way
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Fin_Plng_&_Analysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124985825270
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 106.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Adams, John M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3800 Beecham Ct.
 City Columbus State OH Zip Code 43220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Associate General Counsel
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124985925270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Rozich, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9926 MacDonald Drive
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, HR Services
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124986025270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Revish, Stephanie R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4304 Hickory Rock Dr
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Fin Plannng & Analysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124986125270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Jenny, Frederick P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5013 straits link
 City New Albany State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR124986325270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Hoef, Peter M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 Cardinal Place
 City Galena State OH Zip Code 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Proj Mgr, Bus Integration
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR124986425270
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

C. Myers, Eric, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8410 Russett Ct
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Labor/Employ_(Atty)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR124986525270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Pelizza, Thomas M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 Sassinoro Drive
 City Putnam Valley State NY Zip Code 10579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Territory Sales - Dist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124987225270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Lindroth, Christopher G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 91 Prescott Dr
 City Hudson State OH Zip Code 44236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, GM Edgepark
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124987525270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Gehrt, Kevin E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7439 Merion Ct
 City Solon State OH Zip Code 44139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP,HR Business Partner
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124988025270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	252.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Hinkle, Andrew L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 Simon Rd
 City Hudson State OH Zip Code 44236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Operations, CAH at Home
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124988125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Gotti, Paul R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9960 Concord Rd
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Nuclear Pharmacy
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124988425270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Lehmann, Eileen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8585 Pennington Ct
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Internal Communications
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124989025270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Delfaus Rosario, Maribel L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9400 Wayne Brown Drive
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, HR Business Partner
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124989225270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Hellmann, Rebecca A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1717 Doone Rd
 City Columbus State OH Zip Code 43221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Mktg Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124989825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Lovesy, Jeffrey W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6510 North 14th Place
 City Phoenix State AZ Zip Code 85014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Dir Sales Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1197.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124989925270
 Amount of Each Receipt this Period 126.00
 Memo Item
 P/R Deduction (\$63.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	240.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Cohen, Steven H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2945 Surrey Lane
 City Weston State FL Zip Code 33331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Vice Pres, SIs
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR124990125270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Colatruglio, Marino, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4500 Clark Shaw Rd
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Facilities & RE Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR125269325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Elliott, Vernon E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 Mill Wood Blvd.
 City Marysville State OH Zip Code 43040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, IT Client Sys Mgmt
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR125269725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Filas, Melanie C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 Riverwood Lane
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Compensation.
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR125270025270
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

B. Kirkland, Richard D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 571 Birch Street
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, D&I
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR125270225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Daniels, Edward, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3832 Dennis Rd
 City New Holland State OH Zip Code 43145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Ethics & Compliance Mngmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR129786825270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	164.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Harper, Kristin R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5732 Rocky Shore Drive
 City Lewis Center State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR129786925270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Briggs, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6280 Ox Ridge Trail
 City Highland Heights State OH Zip Code 44143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, GM Category Mgmt CAH at Home
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR129787025270
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

C. Lazzaro, Rosario J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 74 South Street
 City Cresskill State NJ Zip Code 07626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Director, Pharmacy
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130084625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 164.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 179
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Gomez, Jorge M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8028 Holyrood Court
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Finance.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130358225270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

B. Sullivan, John P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7101 Robertson Court
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Strtegy Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130358325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Phillips, Eli G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2975 Rockford Drive
 City Columbus State OH Zip Code 43221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, QRA Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130358425270
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	128.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Reeves, Kathryn G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3933 Farber Court
 City New Albany State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Enterprise Marketing
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130720025270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Jarrett, Phyllis J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 Cape Cod
 City Irvine State CA Zip Code 92620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Direct Sls Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130810925270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Clark, Daniel J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1825 W Summerdale
 City Chicago State IL Zip Code 60640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130811025270
 Amount of Each Receipt this Period 20.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 196.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Nelson, Maryann, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1236 Timber Trace Drive
 City Wesley Chapel State FL Zip Code 33543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Regulatory_Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130811125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Contardo, Mark A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 Forest Lane
 City Hopkinton State MA Zip Code 01748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Direct Sls Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130811225270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Phillips, Monica W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10115 48th Ave
 City Pleasant Prairie State WI Zip Code 53158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Account.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130811325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Davis, Angela D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1043 Stardrift Ave
 City Frisco State TX Zip Code 75034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Account(DMG)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR130811425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Testa, David J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1107 Lytton Ln
 City Matthews State NC Zip Code 28104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Direct Sls Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR130811525270
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

C. Sawicki, Cliff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6152 Acacia Dr
 City Hilliard State OH Zip Code 43026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Marketing_Mgmt
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 361.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR130811725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Brennan, Peter V, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 Jockey Hollow Run
 City Woolwich Twp State NJ Zip Code 08085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR130811825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Howard, Tracy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6464 Greenstone Loop
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR130811925270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Walker, Lori G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6909 New Albany Links Drive
 City New Albany State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Strategic Plng/Exec
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR130812025270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Fitzgerald, William, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 1925 River Sound Dr.			Transaction ID : PR13081225270
City Knoxville	State TN	Zip Code 37922	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Territory Sales - Dist	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Johnston, Carla K, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 421 Jasmine Ave.			Transaction ID : PR130812325270
City West Sacramento	State CA	Zip Code 95605	Amount of Each Receipt this Period 38.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Mgr, Fin_Plng_& Analysis	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Lantz, Tina G, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 307 E Beck St			Transaction ID : PR130812425270
City Columbus	State OH	Zip Code 43206	Amount of Each Receipt this Period 76.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Sales Operations Mgt	P/R Deduction (\$38.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 722.00		

SUBTOTAL of Receipts This Page (optional).....	164.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Aragon, Charles F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7704 Ogden Woods Blvd
 City New Albany State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Comm/Trans_(Atty)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130812625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Barteau, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18526 Dembridge Dr
 City Davidson State NC Zip Code 28036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Territory Sales - Dist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130812725270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

C. Nathan, David C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 Walnut Glen Court
 City Sacramento State CA Zip Code 95864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Territory Sales - Dist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130812825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Schlissberg, Robert E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7816 Alexandra Dr
 City Hudson State OH Zip Code 44236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, GM (Gen Mgmt)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130812925270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Scoyne, Fraser, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8859 Lindsey Ct
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Finance Ops
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130813025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Glending, Michael J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36422 Gosford Dr
 City Avon State OH Zip Code 44011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Territory Sales CAH at Home
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130813225270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Schorr, Ryan D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 243 Stone Canyon Ct
 City Hinckley State OH Zip Code 44233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Acct Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR130813325270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Gibbs, Kristin A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 Grey Fox Run
 City Chagrin Falls State OH Zip Code 44022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Mktg Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR130813425270
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

C. Wells, Mark J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1219 W 67th St
 City Cleveland State OH Zip Code 44102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR130813525270
 Amount of Each Receipt this Period 19.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	145.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Krarup, Bruce T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9480 Falcon Track
 City Warren State OH Zip Code 44484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Sales Operations Mgt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130813625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Carden, Craig A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2834 Sweet Flag Way
 City Stow State OH Zip Code 44224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Strategic Pric
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130813725270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

C. Dambeck, Matthew P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 705 Santa Maria Dr.
 City Tierra Verde State FL Zip Code 33715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Sales (Wound Care)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130814125270
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	128.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Sena, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7038 Maynard Place
 City New Albany State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP,HR Business Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR130814325270
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

B. Millar, Bruce M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 Fairgrounds Drive
 City Manlius State NY Zip Code 13104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Inventory Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR130814725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Crowley, John D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2523 Titans Lane
 City Brentwood State TN Zip Code 37027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Product or Services Mktg
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR130814825270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	144.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Light, Steven D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4249 Vaux Link
 City New Albany State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130814925270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Morris, Jacqueline L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 Literary Road
 City Cleveland State OH Zip Code 44113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Stratgy Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130815025270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

C. Sawhney, Nalin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1108 Summerhill Drive
 City Malvern State PA Zip Code 19355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, GM Enterprise Corporate Acco
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130815125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 42 OF 179
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Williamson, Russell M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5009 Glenshire Drive
 City Flower Mound State TX Zip Code 75028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, GM Enterprise Corporate Acco
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130815225270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Wiley, William G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3063 Pecan Grove Lane
 City Prosper State TX Zip Code 75078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 760.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130815525270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Hoffman, Rhonda D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 Coal Bend
 City Delaware State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, GM Retail
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130815625270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 43 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Pintek, Michael F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4510 W. Rapid Springs.
 City Austin State TX Zip Code 78746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Accnt Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130815725270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Calla, Nick J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 Windsor Court
 City Pittsburgh State PA Zip Code 15220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Account_Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130815825270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

C. Nielsen, Jan E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4408 Pecan Bend
 City Parker State TX Zip Code 75002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Product or Services Mktg
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130839925270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Crump, Randall G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1031 Redfield Terrace
 City Dunwoody State GA Zip Code 30338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Territory Sales CAH at Home
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR130863525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. English, Patricia M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7611 Beechlake Dr
 City Columbus State OH Zip Code 43235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Accounting
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR130884725270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

C. Marzouk, Shaden, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81 Washington St Unit 2A
 City Brooklyn State NY Zip Code 11201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual)
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 950.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR130884825270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$0.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 45 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Sopp, Douglas G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12245 Brookwood Cir
 City Anchorage State AK Zip Code 99516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Nuclear Pharmacy
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130956725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Laber, Melissa A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8200 Bibury
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Strat Src Glbl Prods
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130967825270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Lieberman, Mark L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Cherry Hill Lane
 City Manalapan State NJ Zip Code 07726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Account.
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR130967925270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. O'Sullivan, Heather M, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016
Mailing Address 94 Kettle Hole Road			Transaction ID : PR130968025270
City Bolton	State MA	Zip Code 01740	Amount of Each Receipt this Period 76.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Clinical Ops	P/R Deduction (\$38.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 722.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cloud, John R, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016
Mailing Address 228 Grandview Dr			Transaction ID : PR131026325270
City Chatham	State LA	Zip Code 71226	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Director, Pharmacy	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 285.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Froom, Karan E, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016
Mailing Address 3964 Darby Park Road			Transaction ID : PR131026425270
City Hilliard	State OH	Zip Code 43026	Amount of Each Receipt this Period 38.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Strategic Plng/Execut	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 361.00	

SUBTOTAL of Receipts This Page (optional).....	144.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Rarey, Meredith A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6115 Braymoore Drive
 City Galena State OH Zip Code 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Strat_Src Gbl Prods
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 570.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131026525270
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$30.00 Bi-Weekly)

B. Sisson, Timothy J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4011 Lyon Dr
 City Columbus State OH Zip Code 43220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Comm_Bus_Partner
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131154725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Reschke, Sara J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 Cove Ct.
 City Longwood State FL Zip Code 32779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131180025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 136.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Simpson, Doris M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 422 Northgate Rd
 City Lindenhurst State IL Zip Code 60046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Invenry Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131180225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Scott, Herbert A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44711 Crestmont Dr.
 City Canton State MI Zip Code 48187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec,Territory Sls
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131180425270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Sovoda, Sidney F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4843 Mead
 City Dearborn State MI Zip Code 48126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Operations Mngmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131180525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Nelson, Scott P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 814 Woodsdale Court
 City Ballwin State MO Zip Code 63011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, HSS Supply Chain
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131180725270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Kelso, Shannon D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 Waterford Drive
 City Mount Holly State NC Zip Code 28120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Territory Sales - Dist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131180825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. DePinto, Joseph I, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9421 Nicholson Way
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Pres, Specialty Solutions
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1905.70

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131181025270
 Amount of Each Receipt this Period 200.60
 Memo Item
 P/R Deduction (\$100.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	338.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Wingham, Matthew T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7260 Wilton Chase
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR131181325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Ghousheh, Samir S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30125 Greenview Pkwy
 City Westlake State OH Zip Code 44145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Acct Mgt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR131181425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Huckabey, Donald C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4433 E 46th Street Apt. 11
 City North Little Rock State AR Zip Code 72117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Customer Order Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR131181625270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 51 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Rozich, Gerrilyn A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9926 MacDonald Drive
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Sply Chain Inv/Purchasing
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131181725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Pousot, Rodolphe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 158 E Beck St
 City Columbus State OH Zip Code 43206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Strtegy Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131182225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Simoncini, Justin C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7312 Marist Lane
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Strat Plng/Execution
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131182325270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Milnes, Robert A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24622 Queensfield Court
 City Katy State TX Zip Code 77494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Phrmacy Operations Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131182625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Wall, Richard C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7703 Marquette St
 City Dallas State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Sales - Medical Dev
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131182725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Bogard, Willia M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2228 Cason Lane
 City Murfreesboro State TN Zip Code 37128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Customer_Service_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131196325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Bragg, Heidi H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9322 Wheatfield Lane
 City Rosenberg State TX Zip Code 77469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Regulatory Mgt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131196625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Clark, Andrew M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6702 Lilac Lane
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Master Black Belt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131196925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Copeland, Terry B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 395 Coneflower Drive
 City Spring Branch State TX Zip Code 78070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Pharm Ops & Acct Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131197225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 54 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Crates, William S, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016
Mailing Address 4071 Killary Dr			Transaction ID : PR131197325270
City Dublin	State OH	Zip Code 43016	Amount of Each Receipt this Period 76.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, QRA Mgmnt	P/R Deduction (\$38.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 722.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Crowe, Sandra M, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016
Mailing Address 1500 Gregg Ave			Transaction ID : PR131197425270
City St. Louis	State MO	Zip Code 63139	Amount of Each Receipt this Period 38.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Mgr, Regulatory_Mgmt	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 361.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Fischer, Jeffrey R, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016
Mailing Address 7032 Willow Run Dr			Transaction ID : PR131197925270
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 76.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Accnt	P/R Deduction (\$38.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 722.00	

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Greco, Anthony J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3866 Croydon Dr NW
 City Canton State OH Zip Code 44718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Cnslt, Acctnt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131198125270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

B. Hansen, Nathaniel A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 732 34th Ave N
 City St. Petersburg State FL Zip Code 33704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Acct Mg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131198525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Harner, Deborah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 899 Ludwig Dr
 City Gahanna State OH Zip Code 43230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Strategic_Plng/Execution
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131198625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Harrill, Mark E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6891 Salerno St NW
 City Canton State OH Zip Code 44718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Digital Campaign Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131198725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Kewale, Navin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6776 Royal Plume Drive
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Software/Info Plat
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131199525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Kreakie, Craig L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6784 Highbridge Pl
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Operations Management
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131199725270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Love, Talvis P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5514 Loch More CT E
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Ent Arch & Info Security
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131199825270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Mignogno, Hollis C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10442 Fairfield Farms Dr
 City Canal Winchester State OH Zip Code 43110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Director Security
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131199925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Minister, Benjamin M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1282 Harran Ave.
 City Columbus State OH Zip Code 43235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131200225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 58 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Muha, Christopher A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13864 Wickfield Pl
 City Parker State CO Zip Code 80134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, QRA Management
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131200325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Pfeiffer, Christopher M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 Sycamore Drive
 City Waldwick State NJ Zip Code 07463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131200825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Pollock, Eric S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 Adams St APT 15J
 City Brooklyn State NY Zip Code 11201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Sales Ops Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131200925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Reid, Jeffrey J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2616 Lady Viviane Lane
 City Lewisville State TX Zip Code 75056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Territory_Sales
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131201225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Shatto, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2672 Bryton Dr
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Advanced Analytics
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131201825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Sturtz, Jerrold E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 143 South Forest Rd
 City Williamsville State NY Zip Code 14221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131202425270
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	106.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Tice, Bradley P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3501 Robbins Nest Rd
 City Thompsons Station State TN Zip Code 37179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131202625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Touve, Jay A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4210 Evansdale Rd
 City Columbus State OH Zip Code 43214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Finance Plng & Anlysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131202725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Varghese, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6234 Pollard Place Drive
 City Hilliard State OH Zip Code 43026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Bus Integrat
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131202925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 61 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Willet, Debra A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7418 Balfoure Circle
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Comm/Trans_(Atty)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131203225270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Xu, Tianning, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2343 Unicoi Ct
 City Duluth State GA Zip Code 30097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, R & D Engrg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131203425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Cullen, Sheila C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 814 Bergquist Drive
 City Ballwin State MO Zip Code 63011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Supv, Clinical Ops
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131219025270
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 144.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Zerbi, Dominic G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 Indian Run Dr.
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Asst Gen Csl, Com/Trans
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131219425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Russell, Martha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12664 CR 314
 City Navasota State TX Zip Code 77868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Asst Gen Csl, Reg
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131219525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Darcy, Alain M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6816 Casselbury Mills Ct
 City Lewis Center State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Cnslt, Advanced Analytics
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131219625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Resnick, Douglas J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10510 Townley Ct
 City Aurora State OH Zip Code 44202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Billing CAH at Home
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131219725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Groves, John T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13021 Oakmere Dr
 City Pickerington State OH Zip Code 43147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Compensation
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131219825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Simon, Jaime, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5860 Baronscourt Way
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Prod & Srvc Development
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131219925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Patterson, Stephanie M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4742 Bluestem Lane
 City Stow State OH Zip Code 44224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Ethics_&_Compliance_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.72

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131220025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Laney, JaLyna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6312 Bunker Drive
 City Locust Grove State GA Zip Code 30248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Clin Spclty
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131220125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Simard, Stephen P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 Potash Rd
 City Frankestown State NH Zip Code 03043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Deployment Leader
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131220225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 65 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Burrs, Bryan L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5428 Middlebury Loop
 City Lewis Center State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Field Srvc
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131220325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Cherwa, Christopher M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 Peters Creek Parkway 337
 City Winston-Salem State NC Zip Code 27101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Finance Plng & Anlysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131220425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Tuzzo, Michael E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 Rose Circle
 City North Tonawanda State NY Zip Code 14120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Inside_Sales
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131220525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Scheuer, Paul D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 Flagstone CT
 City Vacaville State CA Zip Code 95687
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Invenry Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131220625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Waeltz, Brian M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4329 Houser Dr
 City Lewis Center State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Software Engineering
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131220725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Zatlukal, Michael J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 Denniston Dr
 City New Windsor State NY Zip Code 12553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations Mgt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131220825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Webb, Romeyn A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2525 Allen Circle
 City Woodland State CA Zip Code 95776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131220925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Welch, Audrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7523 149th Ave Ct E
 City E Sumner State WA Zip Code 98390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131221025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Boggs, Morgan M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9417 Iron Mountain Way
 City Arvada State CO Zip Code 80007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations Mgt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131221125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 68 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Cliff, Thomas M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6970 Shady Nelms
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131221325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Jacobs, Nicholas A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11715 Ascot Lane
 City Chagrin Falls State OH Zip Code 44023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Sourcing Mgt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131221425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Adams, Natalie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2693 Hoover Crossing Way
 City Grove City State OH Zip Code 43123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Strateg Plng/Execution
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131221525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 179
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Gainer, Natalie A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2014 Philzer St NW
 City North Canton State OH Zip Code 44720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131221625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Briya, Lisa R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5792 Glendavon Loop
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, HR Business Partner
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131221725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Rossettie, Mary Kate, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3983 Santa Nella Place
 City San Diego State CA Zip Code 92130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Account.
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131221825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Toomer, Corine J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2716 Millers Way Drive
 City Ellicott City State MD Zip Code 21043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Acct
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131221925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Burnette, Jr, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4801 Holland Church Road
 City Raleigh State NC Zip Code 27603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Acct
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131222025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Chen, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42862 Oak Post Court
 City Ashburn State VA Zip Code 20148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Territory Sale
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131222125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 71 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Crossley, Richard W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3249 Lockport Road
 City Sanborn State NY Zip Code 14132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mngr, Warehouse Operations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR13122225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Bejarano, Brian J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3859 Village Club Dr
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, DC Ops COE & Transport
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR13122235270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Horick, Robert A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 Raveneaux Ln
 City Tyler State TX Zip Code 75703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Engineering_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131222425270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 72 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Harbaugh, Michael T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19519 Flair Oak
 City San Antonio State TX Zip Code 78258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Territory Sales - Med Prd
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131222525270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Macielak, Francis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7597 Fen Ridge
 City Clarkston State MI Zip Code 48348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Env H&S
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131222625270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Allen, David P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 Ravine Forest
 City Lake Bluff State IL Zip Code 60044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Mktg Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131222725270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 73 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Nagel, Kenton B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 Redbud Dr
 City Hendersonville State TN Zip Code 37075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Operations Management
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131222825270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Black, Gregory D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36300 Sandy Knoll Dr
 City Eastlake State OH Zip Code 44095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Sales Operations Mgt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131222925270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Cochran, Tim A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3946 Meadow Knoll Rd
 City Delaware State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131223025270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 74 OF 179
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Addessi, Constance A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7024 N. 59th Place
 City Paradise Valley State AZ Zip Code 85253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Territory_Sales
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131262725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Barr, David F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 Douglas Court
 City Moorestown State NJ Zip Code 08057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations Mgt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131263225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Bianchi, Anthony J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 662 Pepperwood Dr.
 City Brunswick State OH Zip Code 44212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Territory Sales - Med Prd
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131263325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 75 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Compasso, Michele M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 518 Hill St
 City Sewickley State PA Zip Code 15143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Black Belt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131263825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Daniel, Saji T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7917 Fisher Island Drive
 City Miami State FL Zip Code 33109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, GM
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131263925270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Feeney, Kathleen A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1114 Clubview Blvd South
 City Columbus State OH Zip Code 43235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Deployment Leader
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 399.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131264425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 76 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Hartin, Curtis W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 Lake View Loop
 City Fulshear State TX Zip Code 77441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Phrm Ops & Account Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131264525270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Johnson, David M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 SE El Camino Dr
 City Gresham State OR Zip Code 97080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Cnslt, Franchise Operations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131264725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. King, Cathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 Reinhard Avenue
 City Columbus State OH Zip Code 43206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Account (Enterprise Contrac
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131264825270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Kramer, Larry A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 Grand Ridge Rd
 City St Charles State IL Zip Code 60175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, GM (Gen Mgmt)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131265025270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Lowry, John J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11518 W 157th TER
 City Overland Park State KS Zip Code 66221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Deployment Leader
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131265425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. McBride, Jeffery S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12640 Clear Ridge Road
 City Knoxville State TN Zip Code 37922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131265625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 78 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. McIntire, Stacy A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1603 Grenoble Road
 City Columbus State OH Zip Code 43221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 228.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131265825270
 Amount of Each Receipt this Period 24.00
 Memo Item
 P/R Deduction (\$12.00 Bi-Weekly)

B. Navest, Susan C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8882 Scenic Elk Court
 City Elk Grove State CA Zip Code 95624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Sales Trng & Effect
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131266325270
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

C. Otsuka, Dennis M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9816 Buckeye St. NW
 City Albuquerque State NM Zip Code 87114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Territory Sales - Dist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131266425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 92.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 79 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Raab, Rita A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 Sklar St
 City Ladera Ranch State CA Zip Code 92694
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Invenry Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131266625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Richwine, Catherine H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1294 Murrur Ct
 City Virginia Beach State VA Zip Code 23454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Pharm Ops Proj Mgmt-P Sol
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131266825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Sanders, Anthony L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40425 Tesoro Ln
 City Palmdale State CA Zip Code 93551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Custmr Ops Support
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131267025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 80 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Schrock, Lyndon R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 9
 City Belleaire State MI Zip Code 49615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Direct Sls Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131267325270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Suba, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8870 Darrow Rd. STE F 106-142
 City Twinsburg State OH Zip Code 44087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, IT_Prog/Proj_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131267525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Vitale, John A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Ridings Road
 City Northport State NY Zip Code 11768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec,Territory Sls
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131267725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Smith, Jeffrey S, , ,			Date of Receipt
Mailing Address 1563 Royce Street APT# 3C			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City Brooklyn	State NY	Zip Code 11234	Transaction ID : PR131282625270
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="38.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Cnslt, Terry Sales	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="361.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. OBrien- Miller, Jolene M, , ,			Date of Receipt
Mailing Address 11 Southern Hills Ct.			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City OFallon	State MO	Zip Code 63366	Transaction ID : PR131283025270
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="38.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Pharmacy Ops Mgmt	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="361.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Burruss, Royce, , ,			Date of Receipt
Mailing Address 9043 Sesuit Lane			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City Mechanicsville	State VA	Zip Code 23111	Transaction ID : PR131283125270
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="38.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Progr Management	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="361.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="114.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Hall, Kip C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2423 N Spring Hollow St
 City Wichita State KS Zip Code 67228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Sales - Medical Dev
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131283325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Morse, Adam M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 434 W. Hawthorne
 City Lake Bluff State IL Zip Code 60044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Sales - Medical Dev
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131283425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Elliott, Rhonda F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2463 Ridgewood Circle
 City Fairfield State CA Zip Code 94534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Sales - Medical Dev
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131283525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Rohrbeg, Lars, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Wintergreen Lane
 City Groton State MA Zip Code 01450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Technical Marketing
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131283625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Vinuelas, Melanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13035 East Turquoise
 City Scottsdale State AZ Zip Code 85259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Account Mg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131283725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Goodstein, Jon B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8107 Summerhouse Dr East
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Advanced Analytics
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131283825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Mulugeta, Dawit, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8775 Westward Way
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Advanced Analytics
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131283925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Wemple, Julie D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 Ashleigh Dr
 City Chagrin Falls State OH Zip Code 44022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Billing CAH at Home
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131284025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Walker, Elizabeth V, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2661 McVey Blvd West
 City Columbus State OH Zip Code 43235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Community Relatns
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131284225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

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

FOR LINE NUMBER: PAGE 85 OF 179
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Rachuba, Jennifer L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4930 Barnhurst Lane
 City Hilliard State OH Zip Code 43026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Cust Conctrct Compli
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131284325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Bracken, Burton, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 758 Country Place
 City Santa Clara State UT Zip Code 84765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Direct_Sales_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131284425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Goodsell, Robert P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 Moss Court
 City Woodstock State GA Zip Code 30188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Direct_Sales_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131284525270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Hugeback, Tim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7255 Aloe Ct
 City Rancho Cucamonga State CA Zip Code 91739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Finance Plng & Anlysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : PR131284625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Navarro, Christopher A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14230 Darby Springs Way
 City Cypress State TX Zip Code 77429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Finance Plng & Anlysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : PR131284725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Boon, Adam D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 Woodside Court
 City Brownsburg State IN Zip Code 46112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Health System Pharmcy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : PR131284825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 87 OF 179
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
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<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Gonzalez, Lois M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5900 SW 49 St
 City Miami State FL Zip Code 33155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Inside_Sales
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131284925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Dickerson, David L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1444 Niagara Court
 City Maineville State OH Zip Code 45039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Master Black Belt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131285225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Loya, Luis E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4110 Rivers Run Dr
 City Lewis Center State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Master Black Belt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131285325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 88 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Dixon, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1575 Essex Rd
 City Upper Arlington State OH Zip Code 43221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations Mgt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131285425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Payne, Amy L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4516 Water Mill Drive
 City Buford State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131285525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Ray, Joseph J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 167 Eric Drive
 City Beaver State PA Zip Code 15009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Pharm Ops & Acct Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131285625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 89 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Briggs, Mark F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8628 Woodlands Court
 City Pickerington State OH Zip Code 43147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Sales Comp Plan Design
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131285725270
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

B. Pena, Juan C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address c/o Caredinal Health 5000 SW 75th Ave Suite 121
 City Miami State FL Zip Code 33155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Bus Metric/Analytics
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131285825270
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

C. Dritz, Joshua S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 Rissler Lane
 City Delaware State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Strategic Plng/Execut
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131285925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 118.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 90 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Sims, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 Deckerleaf Ct
 City Winston Salem State NC Zip Code 27106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Territory Sales - Dist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131286125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Habersack, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Vista View Ct
 City Kingsville State MD Zip Code 21087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Territory Sls
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131286225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. LaCava, Vincent, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6849 Kellogg Dr
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131286325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 91 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Speeney, Robert L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6800 Royal Plume Dr
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Director, Credit
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131286425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Holen, Kathryn A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 Deerhill Drive
 City Bogart State GA Zip Code 30622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Director, Eniv H&S
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131286525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Anderson, Christopher J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2600 Cyprus Drive SE
 City Massillon State OH Zip Code 44646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Account.
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131286725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 92 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. McGraw II, Rickie L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4079 Landhigh Lakes Dr
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Account.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131286825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Tuchner, Sean J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1802 West Lincoln Street
 City Mount Prospect State IL Zip Code 60056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Acct
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131286925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Damron, Ruth M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 175 Anselmo Dr
 City Reno State NV Zip Code 89523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Territory_Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131287025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Riley, James F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79 Damsen Rd
 City Rochester State NY Zip Code 14612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Executive, Acct-SPD Alt Care
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131287125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Labianco, Carl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 Lefferts Road
 City Yonkers State NY Zip Code 10705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mngr, Category Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131288125270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

C. McKenzie, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 806 148th Street Court East
 City Tacoma State WA Zip Code 98445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations_Mgmt
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131288725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 94 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Sullivan, Glenn P, , ,			Date of Receipt
Mailing Address 149 E. Main St. PO Box 611			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City Saint Paris	State OH	Zip Code 43072	Transaction ID : PR131289125270
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="38.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Regulatory Mgt	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="361.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Coffey, Terrence, , ,			Date of Receipt
Mailing Address 3763 Lower Saucon Road			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City Hellertown	State PA	Zip Code 18055	Transaction ID : PR131289225270
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="38.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Mgr, Sales - Dist	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="361.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Whitworth, Luke A, , ,			Date of Receipt
Mailing Address 1810 Summit Commerce Park			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City Chagrin Falls	State OH	Zip Code 44023	Transaction ID : PR131292725270
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="38.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Finance & Admin	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="361.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="114.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 95 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Saghbini, Jean-Claude J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 Hunnewell Avenue
 City Newton State MA Zip Code 02458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, GM (Gen Mgmt)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131292825270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Tumey, David M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11346 NW 20th Drive
 City Coral Springs State FL Zip Code 33071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Fellow_Engr, R & D
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131292925270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. WEITZMAN, DEBORAH L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2070 CACIQUE ST
 City SAN JUAN State PR Zip Code 00911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, GM PUERTO RICO/
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131293125270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	252.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 96 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. MONTALVO ORTIZ, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address URB. ANDREAS COURT
 C BIANCA E 6
 City SAN JUAN State PR Zip Code 00976
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, DIRECT SALES MGM
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131293225270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Cotter, Sara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2657 Westmont Blvd
 City Columbus State OH Zip Code 43221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Marketing_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131313225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Crompton, Alan J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3405 Middlepost Ln
 City Rocky River State OH Zip Code 44116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Fin Plannng & Analysis
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131313425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 97 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Flynn, James J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 613 Welshire
 City Bay Village State OH Zip Code 44140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131313625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Haymer, Cynthia A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 685 Deep Woods
 City Aurora State OH Zip Code 44202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Territory Sales CAH at Home
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131313825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Teodecki, Suzanne T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3747 Keating #1
 City San Diego State CA Zip Code 92110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Acct
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131314925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Yoder, Kyle A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 695 Oxford Dr
 City Broadview Heights State OH Zip Code 44147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Contract and Billing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131315225270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Brew, Mitchell E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2975 Somerset Ln
 City Orono State MN Zip Code 55356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131315325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Gates, Geoffrey A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2592 Easthaven Dr.
 City Hudson State OH Zip Code 44236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations Mgt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131315425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 99 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Brake, Jay L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3302 Woods Mill Dr
 City Hilliard State OH Zip Code 43026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Accountant.
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131336025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Weaver, Dana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 Challain Drive
 City Little Rock State AR Zip Code 72223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Sales - Medical Dev
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131336125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Shah, Neil, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3208 Benbrook Pond Drive
 City Hilliard State OH Zip Code 43026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Fin Plannng & Analysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131336325270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 100 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Dedels, Daniell V, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1346 Hunter Ave
 City Columbus State OH Zip Code 43201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Account Mg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131336825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Riemer, Brian K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4813 Forge Acre Drive
 City Perry Hall State MD Zip Code 21128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations Mgt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131336925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Schaffer, Devin K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8710 Glenliven Ct
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Counsel, M & A
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131337225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Seklecki, Joseph F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 Caldwell Circle
 City Newtown State PA Zip Code 18940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Finance Plng & Anlysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131424425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Knight, Makenna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1055 Pine St. Apt. 539
 City Nashville State TN Zip Code 37203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Finance Plng & Anlysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131424925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Friedman, Matthew J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2090 Troon Dr
 City Henderson State NV Zip Code 89074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Cnslt, Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131425225270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 102 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Buck, Michael J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1530 Bay Laurel Drive
 City Menlo Park State CA Zip Code 94025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Pres, Medical Products
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1900.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR131729425270
 Amount of Each Receipt this Period 200.00
 Memo Item
 P/R Deduction (\$100.00 Bi-Weekly)

B. Helt, Courtney L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3310 Township Road 208 NE
 City New Lexington State OH Zip Code 43764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Sls
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR131730825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Callinicos, Sean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 North Oak St # 611
 City Arlington State VA Zip Code 22209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Prof & Govt Relations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3461.40

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR131881225270
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	622.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 103 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Patten, Cathy A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 Meadows Ave
 City Lantana State TX Zip Code 76226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Clncal Ops Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131948525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Renner, Brian T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 W. Starr Avenue
 City Columbus State OH Zip Code 43201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Finance Plng & Anlysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131948625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Spalding, Jennifer M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7735 Sutton Place
 City New Albany State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, General_Counsel
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131948825270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 104 OF 179
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Garavito, Patricio E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9479 Creighton Drive
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, M & A_(Atty)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 532.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131957925270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Isaza, Diego F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5706 Ennishannon Place
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Mktg Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 532.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131958125270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Gomez, Tammy L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1383 Loch Lomond Place
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, HR Bus Partner Medical
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131965225270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 252.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 105 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Halterman, Thomas L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2613 Country Side Drive
 City West Des Moines State IA Zip Code 50265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Phrm Ops & Account Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131965325270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. McGrath, Rebecca F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9604 Jenny Lane
 City Fairfax State VA Zip Code 22032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Government Relations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1620.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR131978625270
 Amount of Each Receipt this Period 270.00
 Memo Item
 P/R Deduction (\$135.00 Bi-Weekly)

C. Wilson, David J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1181 Summit Road
 City Montecito State CA Zip Code 93108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) President, Cordis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR132036225270
 Amount of Each Receipt this Period 200.00
 Memo Item
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	546.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 106 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Haydock, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Stanwood Avenue
 City Plaistow State NH Zip Code 03865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, GM
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR132036325270
 Amount of Each Receipt this Period
 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Roy, John M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4437 Yellow Wood Drive
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, GM (Gen Mgmt)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR132097025270
 Amount of Each Receipt this Period
 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Balzer, James F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 Ranchero Dr
 City Coraopolis State PA Zip Code 15108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Cnslt, Ops Technology
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 207.86

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR77969125270
 Amount of Each Receipt this Period
 21.88
 Memo Item
 P/R Deduction (\$10.94 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	221.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 107 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Glover, Robert F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5633 N Kostner Avenue
 City Chicago State IL Zip Code 60646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Account (Enterprise Contract)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 631.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87377425270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Overman, Mark R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 Wyndham Hill Ct
 City Southlake State TX Zip Code 76092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Account (Enterprise Contract)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 858.80

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87377725270
 Amount of Each Receipt this Period 90.40
 Memo Item
 P/R Deduction (\$45.20 Bi-Weekly)

C. Lockyer, Linda S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1133 Noe Street
 City San Francisco State CA Zip Code 94114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Account (Enterprise Contract)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87377825270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	242.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 108 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Berg, Michael T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 797 Wexford Court
 City Grayslake State IL Zip Code 60030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, GM Presource
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87378325270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Kerski, Christopher D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8155 Campden Lakes Boulevard
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, GM Laboratory Products
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 760.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87378625270
 Amount of Each Receipt this Period 80.00
 Memo Item
 P/R Deduction (\$40.00 Bi-Weekly)

C. Henderson, Mark T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11300 Glenwood Street
 City Shawnee State KS Zip Code 66226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Direct Sis Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 352.26

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87378725270
 Amount of Each Receipt this Period 37.08
 Memo Item
 P/R Deduction (\$18.54 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	217.08
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 109 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Popejoy, Kathy S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11127 W 59th Ave
 City Arvada State CO Zip Code 80004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 510.15

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87379425270
 Amount of Each Receipt this Period 53.70
 Memo Item
 P/R Deduction (\$26.85 Bi-Weekly)

B. Anderson, Christopher J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 George Pierce
 City Suwanee State GA Zip Code 30024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, QRA Management
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87379925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Wilson, Brad, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30121 Fiddlers Green
 City Farmington Hills State MI Zip Code 48334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Accnt Mngmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 256.50

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87380125270
 Amount of Each Receipt this Period 27.00
 Memo Item
 P/R Deduction (\$13.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	118.70
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 110 OF 179
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Katz, Douglas J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 McCue Rd
 City Morganville State NJ Zip Code 07751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CARDINAL HEALTH, INC VP, Direct Sls Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : PR87380225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Render, David B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6909 Maris Ct
 City Burleson State TX Zip Code 76028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CARDINAL HEALTH, INC Dir, Operations Mgt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.57

Date of Receipt
 09 / 30 / 2016
Transaction ID : PR87380925270
 Amount of Each Receipt this Period 30.06
 Memo Item
 P/R Deduction (\$15.03 Bi-Weekly)

C. Whidden, James A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6603 Chaucer Place SW
 City Ocean Isle Beach State NC Zip Code 28469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CARDINAL HEALTH, INC Dir, Regulatory Mgt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : PR87381025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 106.06
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 112 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Swanberg, Daniel L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3648 Tierra Paris
 City El Paso State TX Zip Code 79938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Engineering_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87382225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Groesbeck, Michael L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33916 N Summerfields Dr
 City Gurnee State IL Zip Code 60031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, QRA Medical
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 760.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87382325270
 Amount of Each Receipt this Period 80.00
 Memo Item
 P/R Deduction (\$40.00 Bi-Weekly)

C. Schotz, Debra L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2351 Thornwood Avenue
 City Wilmette State IL Zip Code 60091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, US Marketing
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87382725270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	218.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 113 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Brewster, Gregg A, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 3710 Fenceline Road			Transaction ID : PR87382825270
City Franksville	State WI	Zip Code 53126	Amount of Each Receipt this Period 38.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Account (Enterprise Contrac	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Donatich, Michele B, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 520 Penny Lane			Transaction ID : PR87383025270
City Grayslake	State IL	Zip Code 60030	Amount of Each Receipt this Period 29.16
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Cust Advocacy-Clin	P/R Deduction (\$14.58 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.02		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Storm, Greg W, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address Varies By Worker			Transaction ID : PR87383425270
City Little Rock	State AR	Zip Code 72223	Amount of Each Receipt this Period 64.02
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Exec, SIs	P/R Deduction (\$32.01 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 608.19		

SUBTOTAL of Receipts This Page (optional).....	131.18
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 114 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Sosa, Wilfrido M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 Live Oak
 City El Paso State TX Zip Code 79932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Manufacturing (Medical Prod)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87384125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Jacobson, Susan J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3175 Tremont Road unit 413
 City Upper Arlington State OH Zip Code 43221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Deputy General Counsel
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87384525270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Hobgood, Robert B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 2665
 City Asheville State NC Zip Code 28802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Account Mg
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87384625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Long, Evelyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3333 Hawks Ridge Dr
 City Lakeland State FL Zip Code 33810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations Mgt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87384825270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

B. Spirko, Kate C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6812 Spruce Pine Dr
 City Columbus State OH Zip Code 43235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, HR Service Center
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87385125270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Stoll, Rachel R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4228 St. Andrews Blvd
 City Irving State TX Zip Code 75038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Direct Sis Mgmt
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87385325270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 116 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Septer, Stacy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 Miller Drive
 City Sylacauga State AL Zip Code 35151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Direct_Sales_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87385625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Pogue, Paul S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1174 Greers Landing Dr
 City Hernando State MS Zip Code 38632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87386025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Misplay, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 Greenwich Blvd Apt. 107
 City Lake Wylie State SC Zip Code 29710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Account Mgmt (Ambulatory)
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87386625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 117 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Kohut, Matthew J, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 809 East Rockland Rd			Transaction ID : PR87386725270
City Libertyville	State IL	Zip Code 60048	Amount of Each Receipt this Period 26.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) SVP, Product & Services Sales	P/R Deduction (\$13.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wilens, Curtis L, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 1347 Coventry Ln			Transaction ID : PR87386825270
City Northbrook	State IL	Zip Code 60062	Amount of Each Receipt this Period 38.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Market Research	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Donnelly, Scott A, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2016
Mailing Address 12659 Hickory Ridge Road			Transaction ID : PR87387525270
City Plain City	State OH	Zip Code 43064	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, GM (Gen Mgmt)	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 380.00		

SUBTOTAL of Receipts This Page (optional).....	104.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 118 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Moulton, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7017 Violet Veil
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Finance Plng & Anlysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87387625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Farley, Paul G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 52 Onondaga Rd
 City Narragansett State RI Zip Code 02882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, AcCnt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87388025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Sullivan, Edward, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 Bernon Drive
 City Lincoln State RI Zip Code 02865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Dir Sales Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 518.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87388125270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 119 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Bishop, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9712 Persimmon Place
 City Plain City State OH Zip Code 43064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Finance Plng & Anlysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87388225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Eckhart, Patrick J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2600 Deseret Dr
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Strat_Src Indirect
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87388325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Rumfola, Annlea C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10472 Mackenzie Way
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Pharmaceutical Segment IT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87388525270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 120 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Fiacco, John A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 Fox Haven Drive
 City O'Fallon State MO Zip Code 63368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Pharm_Ops Mgmt - Med Shop
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87388625270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Synor, Michael D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31772 Fairway Dr N
 City Foristell State MO Zip Code 63348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Territory_Sales
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87388825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Bonanni, James W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7511 Plum Hollow Cir
 City Liverpool State NY Zip Code 13090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Account (Enterprise Contrac
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87388925270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Sutherland, Eric D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6433 Tulipwood Lane
 City Jamesville State NY Zip Code 13078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations Mgt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR87389025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Robinson, Kristina M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5464 Heathrow Drive
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 306.85

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR87389125270
 Amount of Each Receipt this Period 32.30
 Memo Item
 P/R Deduction (\$16.15 Bi-Weekly)

C. Smith, Andre D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1333 Eldridge Parkway Apt 1128
 City Houston State TX Zip Code 77077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Phrm Ops & Account Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR87389325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	108.30
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 122 OF 179
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. DiBiase, Ted L, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016		
Mailing Address 4954 Rosegate Court			Transaction ID : PR87389425270		
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 122.40		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Employee Relations & Labor	P/R Deduction (\$61.20 Bi-Weekly)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1162.80			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gaines, Joshua T, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016		
Mailing Address 2629 Bexley Park Road			Transaction ID : PR87389625270		
City Bexley	State OH	Zip Code 43209	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) SVP, Strategy & Corp Devel	P/R Deduction (\$50.00 Bi-Weekly)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 950.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hume, Cheryl L, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016		
Mailing Address 2762 Cannon Circle			Transaction ID : PR87389725270		
City Lewis Center	State OH	Zip Code 43035	Amount of Each Receipt this Period 24.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Invenry Mgmt	P/R Deduction (\$12.00 Bi-Weekly)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 228.00			

SUBTOTAL of Receipts This Page (optional).....	246.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 123 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Flannery, Stephen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 275 East Center St
 City Shavertown State PA Zip Code 18708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Account (Government)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 420.47

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87389825270
 Amount of Each Receipt this Period 44.26
 Memo Item
 P/R Deduction (\$22.13 Bi-Weekly)

B. Aquilina, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4871 Normandy Drive
 City Galena State OH Zip Code 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87389925270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Legay, Michael J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 Bitterfield Dr
 City Ballwin State MO Zip Code 63011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Cnslt, Franchise Operations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87390425270
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 150.26
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 124 OF 179
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Summers, Robert S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 Chasely Circle
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 595.27

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87390525270
 Amount of Each Receipt this Period 62.66
 Memo Item
 P/R Deduction (\$31.33 Bi-Weekly)

B. Nicol, Natasha C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 Red Tail Hawk Loop
 City Pawleys Island State SC Zip Code 29585
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Clinical Spec - Pharm Sol
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87390625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. McCaffrey, Sean M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 Buck Run Rd
 City Canonsburg State PA Zip Code 15317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87390725270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 125 OF 179
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
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<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Wolin, Deborah E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15200 Memorial Dr.
 Unit 1903
 City Houston State TX Zip Code 77079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Asc_Gen_Csl,_Comm/Trans
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87390825270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

B. Callison, Steven J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1368 Lincoln Road
 City Columbus State OH Zip Code 43212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Software Engineering
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 378.29

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87390925270
 Amount of Each Receipt this Period 39.82
 Memo Item
 P/R Deduction (\$19.91 Bi-Weekly)

C. Wadsworth, Ronald M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4310 Suffolk Way
 City El Dorado Hills State CA Zip Code 95762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Operations_Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87391025270
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	109.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 126 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Smith, William F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8501 Heatherwood Drive
 City Savannah State GA Zip Code 31406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Cnslt, Bus Analysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.02

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87391525270
 Amount of Each Receipt this Period 21.16
 Memo Item
 P/R Deduction (\$10.58 Bi-Weekly)

B. Ginn, John O, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 Garnet Hill Drive
 City Lenoir City State TN Zip Code 37772
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Inv Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 456.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87391625270
 Amount of Each Receipt this Period 48.00
 Memo Item
 P/R Deduction (\$24.00 Bi-Weekly)

C. Zimmerman, William H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 Elmwood Drive
 City Delaware State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Strateg Plng/Execution
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87391825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	107.16
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 127 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Cacciatore, Gary G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 Enclave Parkway
 City Houston State TX Zip Code 77059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Reg (Atty)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87391925270
 Amount of Each Receipt this Period 80.00
 Memo Item
 P/R Deduction (\$40.00 Bi-Weekly)

B. Colley, Richard F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2903 21st Ave Ct Se
 City Puyallup State WA Zip Code 98372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Account.
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87392025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Scott, James L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9318 Pradolina Villa Drive
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, National Markets
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87392225270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	218.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 128 OF 179
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Cochran, Bradley G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2589 Aikin Circle S
 City Lewis Center State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Account.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87392425270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Owad, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7558 Heatherwood Ln
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Operational Excellence
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1905.70

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87392525270
 Amount of Each Receipt this Period 200.60
 Memo Item
 P/R Deduction (\$100.30 Bi-Weekly)

C. Stillings, Lisa A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5833 Whitecraigs Ct
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Finance Plng & Anlysis
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87392925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 129 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Brannon, Jeffrey B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3965 Clearlake Circle
 City Zanesville State OH Zip Code 43701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Account.
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87393025270
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

B. Cowman, Craig P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8244 Chippenham Drive
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) EVP, Global Sourcing
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87393125270
 Amount of Each Receipt this Period 200.00
 Memo Item
 P/R Deduction (\$100.00 Bi-Weekly)

C. Havlovitz, Lori S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8969 Sunningdale Lane
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Info Security
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87393225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	288.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 130 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Godfrey, Tracy K, , ,			Date of Receipt
Mailing Address 2576 McCumber			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City Lewis Center	State OH	Zip Code 43035	Transaction ID : PR87393325270
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="38.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Strat Pricing	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="361.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Zawadzki, Mark D, , ,			Date of Receipt
Mailing Address 5991 Kitchen Ct			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City Hilliard	State OH	Zip Code 43026	Transaction ID : PR87393425270
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="40.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Fin Plng & Anlysis	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="380.00"/>		P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Kaufmann, Michael C, , ,			Date of Receipt
Mailing Address 7160 Temperance Point St			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City Westerville	State OH	Zip Code 43082	Transaction ID : PR87393825270
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="384.60"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Chief Financial Officer (CFO)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="3461.40"/>		P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="462.60"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Boggs, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7746 Polo Lane
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR87393925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Thomas, Angela M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9287 Windy Creek Dr
 City Columbus State OH Zip Code 43240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Field Service
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR87394025270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

C. Smith, Laura L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5828 Ivy Branch Dr
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Sls Operations Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt **09 / 30 / 2016**
Transaction ID : PR87394625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 132 OF 179
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Kannally, Kevin M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14529 Robinson Rd
 City Plain City State OH Zip Code 43064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87394725270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Thacker, Dana R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2934 Griffin Dr
 City Lewis Center State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir,Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87394825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Combs, James P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69259 Lee Road
 City St Clairsville State OH Zip Code 43950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exectve, Accnt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87394925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Grant, Carolyn E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6869 Meadow Glen Dr
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87395425270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Kallmeyer, Kristina J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7560 Kerfield Drive
 City Galena State OH Zip Code 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Account (Enterprise Contrac
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87395525270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

C. Sells, Patrick A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3460 Hyatts Rd
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, HR Business Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87396125270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 134 OF 179
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
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<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Baker, Cassandra E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1751 Barrington Rd
 City Upper Arlington State OH Zip Code 43221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Government Relations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87396425270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Barker, James M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2761 Skelton Ln
 City Blacklick State OH Zip Code 43004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Strat_Src Gbl Prods
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87396625270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Homan, James J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 Eden Park Drive
 City Franklin State TN Zip Code 37067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Sls
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 264.48

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87396725270
 Amount of Each Receipt this Period 27.84
 Memo Item
 P/R Deduction (\$13.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	179.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 135 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Sanders, Chad E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 831 Ellis St
 City Pickerington State OH Zip Code 43147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Territory Sale
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 228.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87397125270
 Amount of Each Receipt this Period 24.00
 Memo Item
 P/R Deduction (\$12.00 Bi-Weekly)

B. Scherer, Mary C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 Weatherburn Ct
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Internal Audit-Finance
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87397325270
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

C. Giacomini, Jon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6792 Ingalls Ct
 City Galena State OH Zip Code 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) CEO, Pharmaceutical Segment
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1425.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87397425270
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$75.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	204.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 136 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. McCluskey, Anne F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10910 E San Tan Blvd
 City Sun Lakes State AZ Zip Code 85248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Clinical Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87397625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Giacalone, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7471 Balfoure Circle
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Reg Affairs/Chf Reg Cnsl
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87397825270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Fluno, Debra A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 Sunnyside Ave
 City Gurnee State IL Zip Code 60031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Pharm Ops & Acct Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87398025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$0.88 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Brown, Michael D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3103 Saddle Ridge
 City Richmond State TX Zip Code 77406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Pharm_Ops & Account_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87398225270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Gleason, Jacqueline A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N 7896 Valley View Rd
 City New Glarus State WI Zip Code 53574
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Program Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87398725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Woo, Anthony D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6151 Haddo Way
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Corp Devel, Fin Anl/Val
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87398825270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 138 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Ableidinger, Kathryn J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 Ashbury Ct
 City Hudson State WI Zip Code 54016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87399025270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Robinson, Daniel R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8124 Crooked Oaks Ct
 City Gainesville State VA Zip Code 20155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Pharm Ops & Acctn Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87399125270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Lawrence, Stephen M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8358 Meadowlark Lane
 City Delaware State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Retail Independent Sales
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87399225270
 Amount of Each Receipt this Period 200.00
 Memo Item
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	352.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 139 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Crawford, Gordon A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8735 Richards Rd.
 City Utica State OH Zip Code 43080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, IT Progm/Proj Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87399325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Lawrence, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 326 Vinwood Lane
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Strtgc Plng/Execution
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87399425270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Martin, Stuart, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9723 Turquoise Ln
 City Brentwood State TN Zip Code 37027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations_Mgmt
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87399725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Malham, Lawrence, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 206 Lone Oak Drive

City White House	State TN	Zip Code 37188
---------------------	-------------	-------------------

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

Name of Employer (for Individual) CARDINAL HEALTH, INC	Occupation (for Individual) Dir, Territory_Sales
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
361.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : PR87399825270

Amount of Each Receipt this Period
38.00

Memo Item

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

B. Gajeski, David E, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21406 Saunton Dr.

City Katy	State TX	Zip Code 77450
--------------	-------------	-------------------

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

Name of Employer (for Individual) CARDINAL HEALTH, INC	Occupation (for Individual) Vice Pres, Sls
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
798.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : PR87400325270

Amount of Each Receipt this Period
76.00

Memo Item

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

C. Sherrer, Kendell F, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 Urlin Avenue
Suite #2017

City Grandview	State OH	Zip Code 43212
-------------------	-------------	-------------------

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

Name of Employer (for Individual) CARDINAL HEALTH, INC	Occupation (for Individual) VP, Benefits
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
385.89

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

Transaction ID : PR87400825270

Amount of Each Receipt this Period
40.62

Memo Item

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

SUBTOTAL of Receipts This Page (optional).....	154.62
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 141 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Ellis, Gary B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6146 Balmoral Drive
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP/GM Innovative Delivery Solut
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1905.70

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87400925270
 Amount of Each Receipt this Period 200.60
 Memo Item
 P/R Deduction (\$0.00 Bi-Weekly)

B. Evensen, Leeann, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1423 Shady Valley
 City Sugar Land State TX Zip Code 77479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Cnslt, Bus Analysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87401125270
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

C. Stavinoha, Tina M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 Arrow Road
 City Eagle Lake State TX Zip Code 77434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Learning_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87401425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	268.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 142 OF 179
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Jorgensen, Robbie D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3457 HWY Z
 City Wentzville State MO Zip Code 63385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87401625270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Worth, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5654 Rothesay Drive
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, HR Business Partner Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87401925270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Olson, David S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 Marina Dr
 City Bullard State TX Zip Code 75757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Phrm Ops & Account Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87402325270
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	233.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 143 OF 179
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Christensen, Eric C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8624 Greenarbor Rd
 City Albuquerque State NM Zip Code 87122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Asc_Gen_Csl_Comm/Trans
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87402425270
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

B. Ellis, David M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6521 Goya Way
 City El Dorado Hills State CA Zip Code 95762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87402925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Williams, Blair R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 Cardinal Place
 City Westerville State OH Zip Code 43081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, HR Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87403125270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	164.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Keller, Andrew R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 3732
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Strat Plng/Execution
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87403325270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Johnson, Eric M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8078 Trail Lake Dr
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Fin Planng & Analysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87404025270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Mann, Donna B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6666 McVey Blvd
 City West Worthington State OH Zip Code 43235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Prgm Dir, Prog/Proj Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 543.40

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87404225270
 Amount of Each Receipt this Period 57.20
 Memo Item
 P/R Deduction (\$28.60 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	209.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Dixon, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1575 Essex Road
 City Columbus State OH Zip Code 43221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Customer Service Mngmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : PR87404325270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Harry, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 Breezewood Ln
 City Galena State OH Zip Code 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Fin Planng & Analysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : PR87404525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Fields, Lauren E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4316 Oak Wood Court
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Sales Ops Mgmt
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : PR87404625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DeLorenzo, Marc D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 231 Tiller Drive
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, GM.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87404925270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Bolling, Eric T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13162 Thornton Drive
 City Frisco State TX Zip Code 75035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, GM Enterprise Corporate Acco
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87405425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Baxter, Mary W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3273 Stapleford Chase
 City Virginia Beach State VA Zip Code 23452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Pharm_Ops & Account_Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87405525270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 147 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Robinette, Kimberly A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9409 Avemore Ct.
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Finance Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87405725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Buster, Paul T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 W Beechwold Blvd
 City Columbus State OH Zip Code 43214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 342.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87405925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Brady, Cameron J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 N. Clinton St. Unit 2204
 City Chicago State IL Zip Code 60654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Account.
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87406225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 148 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Wolff, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3446 N Claremont Ave
 City Chicago State IL Zip Code 60618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Deployment Leader
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87406525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Singleton, Brian K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2521 East 31st Street
 City Tulsa State OK Zip Code 74105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 342.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87406625270
 Amount of Each Receipt this Period 19.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Lindsey, John S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Timberknoll Loop
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Enterprise Infrastructure
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87406725270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 157.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 149 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Baranski, Craig C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 Massina Dr
 City Wheeling State WV Zip Code 26003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations Mgt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR87406825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Buss, Brian R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7483 Bardston Drive
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, IT Prog/Proj Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR87407025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Gabel, Robert M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1605 Berlin Station Rd
 City Delaware State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Enterprise Risk Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR87407125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 150 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Grubbs, Harold E, , ,			Date of Receipt
Mailing Address 7802 Spencer Brook Dr			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City Summerfield	State NC	Zip Code 27358	Transaction ID : PR87407225270
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="24.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Deployment Leader	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="228.00"/>		P/R Deduction (\$12.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Byrnes, John J, , ,			Date of Receipt
Mailing Address 161 Tucker Dr			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City Worthington	State OH	Zip Code 43085	Transaction ID : PR87407625270
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="76.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Tax Counsel	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="722.00"/>		P/R Deduction (\$38.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Grant, Andrew, , ,			Date of Receipt
Mailing Address 9440 Nicholson way			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City Dublin	State OH	Zip Code 43017	Transaction ID : PR87407725270
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="38.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Account.	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="361.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="138.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 151 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Robinette, Kenneth H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9409 Avemore Ct.
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Deployment Leader
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87407825270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Luchini, Donald S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 Lakeside Drive
 City McKees Rocks State PA Zip Code 15136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Finance Plng & Anlysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87408225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Braun, Dennis W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5667 Medallion Dr West
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Finance
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87408325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 152 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Greer, Jeffrey E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1570 Cambridge Blvd
 City Marble Cliff State OH Zip Code 43212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Enterprise_Architecture
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87408625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Greiner, Colleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 476 Duane Drive
 City North Tonawanda State NY Zip Code 14120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Direct Sls Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87409125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Halvacs, Gregory J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1159 Bean Oller
 City Delaware State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Corporate Security
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87409425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 153 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Mone', Michael A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4909 Scenic Creek Dr
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Asc_Gen_Csl_Regulatory
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87409525270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Duffy, Michael A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 729 Mohawk Street
 City Columbus State OH Zip Code 43206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Pres, Hospital Solutions & Globa
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87409625270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

C. Nagel, Stanley L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6486 Ballantrae Place
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, HR Business Partner
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 646.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87409725270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Einhorn, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8136 Cantabria Falls Dr
 City Boynton Beach State FL Zip Code 33473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Strategic Pric
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR87409925270
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

B. Huston, Martha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 490 E. Sunburst Ln
 City Tempe State AZ Zip Code 85284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR87410125270
 Amount of Each Receipt this Period
 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Alderman, Andrew T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1225 Leicester Pl.
 City Columbus State OH Zip Code 43235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Strategy & Bus Dev
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR87410525270
 Amount of Each Receipt this Period
 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	206.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 155 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Thompson, Robert S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8338 Amberleigh Way
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Prod & Srvc Development
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87410725270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Wehr, Andrew W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 905 Little Bear Loop
 City Lewis Center State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dirtr, EH&S
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87410825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Brown, Ronald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7417 NewAlbanyLinkDr
 City New Albany State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1083.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87410925270
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$57.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Villarreal, Ismael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6514 Forfar Ln
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 646.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87411025270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Dion, David R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 182 N Flora Parkway
 City Addison State IL Zip Code 60101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Quality Cntrl
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87411125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Girard, Maureen T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 552 Ridgeside Drive
 City Golden State CO Zip Code 80401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Mktg Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87411425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Mayer, Jessica L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4852 Carrigan Ridge
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Deputy General Counsel
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 910.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87411725270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Laws, Stuart G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5635 Cypress Court
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Chief Accounting Officer
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87412025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Fowler, Bonny L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 Cherry Street
 City Granville State OH Zip Code 43023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Comm Business Partner
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87412325270
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 188.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 158 OF 179
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. La Bue, Anne Marie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1877 Tewksbury Rd
 City Upper Arlington State OH Zip Code 43221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Asc Gen Cnsl, Corp/Secur
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87412425270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Hall, Carl E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 Tanglin Road #08-10 St Regis Residences
 City Singapore State ZZ Zip Code 99999
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Territory Sales (Asia)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87412525270
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

C. Smith, Alan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6612 N. Creekwood Dr
 City Brentwood State TN Zip Code 37027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, QRA Management
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87412825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 144.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Sulzer, Eden C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 522 Bantry St
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Product or Services Mktg
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 228.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87413125270
 Amount of Each Receipt this Period 24.00
 Memo Item
 P/R Deduction (\$12.00 Bi-Weekly)

B. Bentley, Christine L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12283 South Parker Street
 City Olathe State KS Zip Code 66061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir Mangng Cnslt, Reg Sciences M
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87413625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Crist, Jeffrey A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9376 Roseta Villa Drive
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Director, IT Network
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 342.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87414225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 160 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Abdul-Samad, Samer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6271 Belvedere Green Blvd
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Treasurer
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87415025270
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

B. Radigan, Dianne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 West Jeffrey Place
 City Columbus State OH Zip Code 43214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Community Relations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87415125270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Curley, Sally J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9035 Esin Court
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Investor Relations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87415225270
 Amount of Each Receipt this Period 200.00
 Memo Item
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	306.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 161 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Barrett, George S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 246 E. Sycamore St.
 City Columbus State OH Zip Code 43206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Chairman/CEO, Cardinal Health
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3653.70

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87415325270
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. Pilkington, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1747 River Birch Way
 City Libertyville State IL Zip Code 60048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Strat Management
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87415825270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Morford, Craig, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5565 Lake Shore Ave,
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Chief Legal/Compliance Officer
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3653.70

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87415925270
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	845.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. Vahedian, Tohid A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 Taggart ave
 City Nashville State TN Zip Code 37205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR87416325270
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

B. Mangione, Michael J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10733 Jones Road
 City Clarence State NY Zip Code 14031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Territory_Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR87416425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Waters, Sean P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4505 East Broadway
 City Gilbert State AZ Zip Code 85296
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr. Dir, Chem/Pharma Ops
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : PR87417125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 163 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Chilton, Henry M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5080 Ivybridge Drive
 City Lexington State KY Zip Code 40515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Vice Pres, SIs
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87417225270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Augustine, Luke C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10834 S 166th St
 City Omaha State NE Zip Code 68136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Vice Pres, SIs
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87417425270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Benson, Katherine A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3410 Nobb Hill Dr
 City Hudsonville State MI Zip Code 49426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Nuclr Pharmacy
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87417525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	238.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Callicott, Carroll B, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8050 Lesia Drive
 City Denham Springs State LA Zip Code 70706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Nuclear Pharmacy - Area
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87417825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Lukacs, Joseph E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 Village Grove Rd
 City Little Rock State AR Zip Code 72211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Nuclear Pharm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87418125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Mullen, Marc B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1650 Sherborne Lane
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, GM.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87418525270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 165 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Boudreaux, Wayne J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7328 Trade Court
 City Bradenton State FL Zip Code 34212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Nuclear Pharm
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87418825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Rothman, Craig, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 Seminole Way
 City Short Hills State NJ Zip Code 07078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec, Territory Sale
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87418925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Chenetski, Cathy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5734 Ennishannon Place
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, QRA Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87419625270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 166 OF 179
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Russo, Alfredo S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 Manchester Court
 City Columbus State NJ Zip Code 08022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Regulatory_Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87420125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Orensten, David K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2341 Bryden Road
 City Bexley State OH Zip Code 43209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Asst Gen Csl, Litig
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87420225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Armino, Rogelio A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2908 Clearpoint Dr
 City Flower Mound State TX Zip Code 75022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Master Black Belt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87420425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 167 OF 179
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Daufenbach, Eleanor M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2029 W. Lane Avenue
 City Columbus State OH Zip Code 43221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Mrktg Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87420525270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Morrison, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 East Erie #3801
 City Chicago State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) EVP, Customer Support Services,
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3653.70

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87420625270
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

C. Quintero, Gilberto, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6650 Brodie Blvd
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, QRA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87421225270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	498.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 168 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Hatch, Colin, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016
Mailing Address 1351 Noe Bixby Road			Transaction ID : PR87421525270
City Columbus	State OH	Zip Code 43232	Amount of Each Receipt this Period 38.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 361.00	
			P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cheramie, Lane, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016
Mailing Address 152 West 117th Street			Transaction ID : PR87421625270
City Cut Off	State LA	Zip Code 70345	Amount of Each Receipt this Period 76.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Mgr, Pharm Ops Proj Mgmt-P Sol	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 722.00	
			P/R Deduction (\$38.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Helmreich, Douglas, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2016
Mailing Address 6600 Deeside Dr.			Transaction ID : PR87421725270
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 38.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Market Research	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 361.00	
			P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 169 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Ledbetter, Jeffrey P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6700 Ridpath Road
 City Grove City State OH Zip Code 43123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Cnslt, Account
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87422325270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Zaluzney, Michelle M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15435 Eagle Tavern Lane
 City Centreville State VA Zip Code 20120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Vice Pres, Sls
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87422425270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Fitzgerald, Meghan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 Morgan
 City Norwalk State CT Zip Code 06851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) EVP, Strategy and Health Policy
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87422825270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 170 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Aragon, Marsha L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27126 Highlands Ln
 City Valencia State CA Zip Code 91354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87422925270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Movens, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 678 Woodland Bayou Drive
 City Santa Rosa Beach State FL Zip Code 32459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, GM ParMed Pharmaceutical
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87423125270
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Gregory, Ramon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9003 Mediterra Place
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Customer Service
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87423925270
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	188.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Padgitt, Laura A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8289 Wildflower Dr.
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Government Relations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR87424225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Mock, Cathy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5440 York Lane North
 City Columbus State OH Zip Code 43232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Supplier Diversity
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR93409225270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Wilson, Kelly B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7000 Cardinal Place
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Talent Managemnt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR93689225270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 OF 179
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Cherry, Jyothirmayi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5136 Abbotsbury Court
 City New Albany State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Fin Plng & Anlysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR93938825270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Zamora, Eusebio, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9450 Tartan Ridge Blvd
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Pharm Support
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR94090025270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Casey, Donald M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7708 Tillinghast Drive
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) CEO, Medical Segment
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3653.70

Date of Receipt 09 / 30 / 2016
Transaction ID : PR94134325270
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 173 OF 179
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Latshaw, Shauna M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10316 Hoover Woods Rd
 City Galena State OH Zip Code 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 722.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR99505125270
 Amount of Each Receipt this Period 76.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Deuschendorf, Alan L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8243 Worley Dr.
 City Lewis Center State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Deployment Leader
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR99505225270
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

C. Raynak, Sean C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 Mallard Drive
 City Monroeville State PA Zip Code 15146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Pharm Ops Mgmt - Non-rph
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 361.00

Date of Receipt 09 / 30 / 2016
Transaction ID : PR99563125270
 Amount of Each Receipt this Period 38.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	154.00
TOTAL This Period (last page this line number only).....	30019.48

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. Buddy Carter for Congress

Mailing Address c/o Professional Data Services
824 S. Milledge Ave., Ste 101

City Athens State GA Zip Code 30605

Purpose of Disbursement
Direct Contribution

011
Category/
Type

Candidate Name
Carter, Buddy, , Rep.,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: GA District: 01

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2016

FEC Identification Number

C C00543967

Transaction ID : 10082835

Amount of Each Disbursement this Period

2500.00

Direct Contribution

Memo Item

Full Name (Last, First, Middle Initial)

B. Jeff Flake for US Senate Inc

Mailing Address c/o Goeas & Associates, LLC
1707 Prince Street, #5

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Direct Contribution

011
Category/
Type

Candidate Name
Flake, Jeff, , Sen.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify)
State: AZ District:

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2016

FEC Identification Number

C C00347260

Transaction ID : 10082836

Amount of Each Disbursement this Period

2500.00

Direct Contribution

Memo Item

Full Name (Last, First, Middle Initial)

C. Swalwell for Congress

Mailing Address 21 D Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Direct Contribution

011
Category/
Type

Candidate Name
Swalwell, Eric, , Rep.,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: CA District: 15

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2016

FEC Identification Number

C C00502294

Transaction ID : 10082837

Amount of Each Disbursement this Period

2500.00

Direct Contribution

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. Committee to Re-Elect Henry Hank Johnson

Mailing Address 413 New Jersey Ave., SE
Basement

City Washington State DC Zip Code 20003

Purpose of Disbursement
Direct Contribution

011
Category/
Type

Candidate Name
Johnson, Hank, , Rep., Jr.

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: GA District: 04

Date of Disbursement

/ /

FEC Identification Number

C C00418293

Transaction ID : 10082838

Amount of Each Disbursement this Period

Direct Contribution

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Mia Love

Mailing Address C/O Ashley Jordan
1006 Pendleton St.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Direct Contribution

011
Category/
Type

Candidate Name
Love, Mia, , Rep.,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: UT District: 04

Date of Disbursement

/ /

FEC Identification Number

C C00505776

Transaction ID : 10082839

Amount of Each Disbursement this Period

Direct Contribution

Memo Item

Full Name (Last, First, Middle Initial)

C. Butterfield for Congress

Mailing Address 3701 Porter Street, NW

City Washington State DC Zip Code 20016

Purpose of Disbursement
Direct Contribution

011
Category/
Type

Candidate Name
Butterfield, G. K., , Rep.,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NC District: 01

Date of Disbursement

/ /

FEC Identification Number

C C00401190

Transaction ID : 10082840

Amount of Each Disbursement this Period

Direct Contribution

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Ted Deutch for Congress

Full Name (Last, First, Middle Initial)
Mailing Address 201 Massachusetts Ave., NE
Suite C8

City Washington State DC Zip Code 20002

Purpose of Disbursement Direct Contribution

Candidate Name **Deutch, Ted, , Rep.,**

Office Sought: House Senate President
State: FL District: 21

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement: 09 / 20 / 2016

FEC Identification Number: C00469163
Transaction ID : 10082841
Amount of Each Disbursement this Period: 2500.00
Direct Contribution
 Memo Item

B. Hoyer's Majority Fund

Full Name (Last, First, Middle Initial)
Mailing Address 499 S. Capitol Street, SW
Suite 406

City Washington State DC Zip Code 20003

Purpose of Disbursement Direct Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General Other (specify)

Date of Disbursement: 09 / 20 / 2016

FEC Identification Number: C
Transaction ID : 10082842
Amount of Each Disbursement this Period: 2500.00
Direct Contribution
 Memo Item

C. Levin for Congress

Full Name (Last, First, Middle Initial)
Mailing Address C/O Molly Allen Associates, LLC
412 First Street, Suite 100

City Washington State DC Zip Code 20003

Purpose of Disbursement Direct Contribution

Candidate Name **Levin, Sander, M., Rep.,**

Office Sought: House Senate President
State: MI District: 09

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement: 09 / 20 / 2016

FEC Identification Number: C00156612
Transaction ID : 10082844
Amount of Each Disbursement this Period: 2000.00
Direct Contribution
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. Bill Foster for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Mailing Address 499 South Capitol St., SW
Suite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
Direct Contribution

011
Category/ Type

FEC Identification Number

C C00435099

Transaction ID : 10086450

Amount of Each Disbursement this Period

2000.00

Direct Contribution

Memo Item

Candidate Name

Foster, Bill, , Rep.,

Office Sought: House
 Senate
 President
State: IL District: 11

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

FEC Identification Number

C

Amount of Each Disbursement this Period

--

Memo Item

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

FEC Identification Number

C

Amount of Each Disbursement this Period

--

Memo Item

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional).....▶

2000.00

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

23000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial) A. Husted for Ohio		Date of Disbursement MM / DD / YYYY 09 / 16 / 2016
Mailing Address 211 S Fifth St		FEC Identification Number C [REDACTED] Transaction ID : 10080761
City Columbus	State OH	Zip Code 43215
Purpose of Disbursement Jon Husted, SECRETARY OF STATE OH		Amount of Each Disbursement this Period [REDACTED] 2500.00
Candidate Name Husted, Jon, , ,		Memo Item <input type="checkbox"/> Jon Husted, SECRETARY OF STATE OH
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 011	

Full Name (Last, First, Middle Initial) B. Citizens for Bishoff		Date of Disbursement MM / DD / YYYY 09 / 16 / 2016
Mailing Address 2902 Braden Way		FEC Identification Number C [REDACTED] Transaction ID : 10080762
City Blacklick	State OH	Zip Code 43004
Purpose of Disbursement Heather Bishoff, STATE HOUSE 20th OH		Amount of Each Disbursement this Period [REDACTED] 1000.00
Candidate Name Bishoff, Heather, , OH Rep.,		Memo Item <input type="checkbox"/> Heather Bishoff, STATE HOUSE 20th OH
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 011	

Full Name (Last, First, Middle Initial) C. Brenner for Ohio		Date of Disbursement MM / DD / YYYY 09 / 16 / 2016
Mailing Address PO Box 100		FEC Identification Number C [REDACTED] Transaction ID : 10080772
City Powell	State OH	Zip Code 43065
Purpose of Disbursement Andrew Brenner, STATE HOUSE 67th OH		Amount of Each Disbursement this Period [REDACTED] 500.00
Candidate Name Brenner, Andrew, , OH Rep.,		Memo Item <input type="checkbox"/> Andrew Brenner, STATE HOUSE 67th OH
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 011	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 4000.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial) A. LaRose for Senate		Date of Disbursement MM / DD / YYYY 09 / 22 / 2016	
Mailing Address 3840 Ridgewood Rd #4323		FEC Identification Number C [] Transaction ID : 10086449	
City Copley	State OH	Zip Code 44321	Amount of Each Disbursement this Period [] 2500.00 Direct Contribution
Purpose of Disbursement Direct Contribution		Category/Type 011	<input type="checkbox"/> Memo Item
Candidate Name LaRose, Frank, , OH Sen.,			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period []
Purpose of Disbursement		Category/Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period []
Purpose of Disbursement		Category/Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	6500.00