

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

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

FOR LINE NUMBER: PAGE 38 OF 181

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. Fischer, Jeffrey, R.,

Mailing Address 7032 Willow Run Dr
Dublin

City State Zip Code
Dublin OH 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 ▼

1026.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2019

Transaction ID : PR131197944684

Amount of Each Receipt this Period

76.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fortner, Rhonda, L.,

Mailing Address P.O. Box 773
Graham

City State Zip Code
Graham WA 98338

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CARDINAL HEALTH, INC

Occupation (for Individual)
Mgr, HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2019

Transaction ID : PR131198044684

Amount of Each Receipt this Period

20.00

☐ Memo Item

P/R Deduction (\$10.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Greco, Anthony, J.,

Mailing Address 3866 Croydon Dr NW
Canton

City State Zip Code
Canton OH 44718

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CARDINAL HEALTH, INC

Occupation (for Individual)
Sr Cnslt, Terr Mgmt-Home Hlth

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2019

Transaction ID : PR131198144684

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

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

136.00