

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 FEC ID C00332833

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

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00332833
3. IS THIS REPORT NEW OR AMENDED
[x] (N) [] (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Jan 31
(c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special
(d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 11 / 24 / 2020 through 12 / 31 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. McGrath, Rebecca, , ,

Type or Print Name of Treasurer

Signature of Treasurer McGrath, Rebecca, , , [Electronically Filed] Date 01 / 20 / 2021

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)

Page 2

Write or Type Committee Name

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC FEC ID C00332833

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="2020"/>	<input type="text" value="245013.09"/>	<input type="text" value="245013.09"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="187177.20"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="33067.62"/>	<input type="text" value="302231.73"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="220244.82"/>	<input type="text" value="547244.82"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="- 23450.00"/>	<input type="text" value="303550.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="243694.82"/>	<input type="text" value="243694.82"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC FEC ID C00332833

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	32232.42	210091.03
(ii) Unitemized	835.20	92140.70
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	33067.62	302231.73
(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)	33067.62	302231.73
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	0.00
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)).....▶	33067.62	302231.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	33067.62	302231.73

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	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	- 22500.00	200000.00
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).....	- 950.00	103550.00
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)) ..	- 23450.00	303550.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	- 23450.00	303550.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	33067.62	302231.73
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	33067.62	302231.73
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 160
<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 FEC ID C00332833

A. Pitts, Rosemary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8673 Finlarig 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) SVP, Finance
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR118725352249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Clerico, Ronald J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 760 Lakeview Drive
 City West Jefferson State OH Zip Code 43162
 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR118725452249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Gleason, Karen A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3897 Manson Pike
 City Murfreesboro State TN Zip Code 37129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Prgm Mgr, Prog/Proj Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR120633552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	201.00
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 160
	<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 FEC ID C00332833

A. 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 ▼ 4999.80

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR120670152249
 Amount of Each Receipt this Period 576.90
 Memo Item
 P/R Deduction (\$192.30 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 Mgt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR122694752249
 Amount of Each Receipt this Period 57.00
 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 ▼ 494.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR122694852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	690.90
TOTAL This Period (last page this line 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 160
<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 FEC ID C00332833

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) Dirctr, EH&S
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR122779752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Chugh, Kishore A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8283 Ridgepointe Dr
 City Burr Ridge State IL Zip Code 60527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Dir Sales Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 208.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR122779852249
 Amount of Each Receipt this Period 24.00
 Memo Item
 P/R Deduction (\$8.00 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 ▼ 780.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124937552249
 Amount of Each Receipt this Period 90.00
 Memo Item
 P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	171.00
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 160
<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 FEC ID C00332833

A. 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 ▼ 999.96

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR124937852249
 Amount of Each Receipt this Period: 115.38
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. Mason, Stephen M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6544 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) CEO, Medical Segment
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2600.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR124938052249
 Amount of Each Receipt this Period: 300.00
 Memo Item
 P/R Deduction (\$100.00 Bi-Weekly)

C. Hula-Mills, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8581 The Island
 City Memphis State TN Zip Code 38125
 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 ▼ 988.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR124938452249
 Amount of Each Receipt this Period: 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	529.38
TOTAL This Period (last page this line 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 160
<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 FEC ID C00332833

A. Garcia, Luis E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14320 NW 16 Street
 City: Pembroke Pines, State: FL, Zip Code: 33028
 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 ▼ 988.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR124938552249
 Amount of Each Receipt this Period: 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Behm, Jonathan L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 Paradise Lane
 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_Src Gbl Prods
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR124983952249
 Amount of Each Receipt this Period: 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Karavitch, Stephen W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 794 Golden Eagle Dr
 City: Nazareth, State: PA, Zip Code: 18064
 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 ▼ 260.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR124984052249
 Amount of Each Receipt this Period: 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	174.00
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 160
<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 FEC ID C00332833

A. 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124984252249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. 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_Sales Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124984452249
 Amount of Each Receipt this Period 114.00
 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, Operations_Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124984952249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	285.00
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 160
<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 FEC ID C00332833

A. Igel, Martin E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4010 Newhall 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, Strat Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR124985052249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. 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) VP, Customer_Service_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR124985152249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. 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, Connected Care & Commercial
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR124985252249
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 237.00
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 160
<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 FEC ID C00332833

A. 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 ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124985352249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124985452249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124985652249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 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 14 OF 160
<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 FEC ID C00332833

A. Conway, Michele, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10640 Honeysuckle Way
 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) Mgr, Finance_Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124985852249
 Amount of Each Receipt this Period 45.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

B. 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 ▼ 1300.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124985952249
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. 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 Bus Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124986052249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	309.00
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 160
<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 FEC ID C00332833

A. Revish, Stephanie R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4383 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 ▼ 520.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124986152249
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

B. 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 ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124986352249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 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 ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124986552249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 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 16 OF 160
<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 FEC ID C00332833

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 ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124987252249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 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 ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124988452249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Wright, Herman L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 Green Vista Crossing
 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) Asst Gen Csl, Comm/Trans
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124989152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	258.00
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 160
<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 FEC ID C00332833

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 ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124989252249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. 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, Sls
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR124990152249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. 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, Factlies & RE Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR125269352249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	285.00
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 160
<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 FEC ID C00332833

A. Elliott, Vernon E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15897 Barnes DR
 City Belle Center State OH Zip Code 43310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Engr, IT Client Sys Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR125269752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Pavol, Stephanie M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 248 Crossing Creek N
 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) Sr Mgr, Product and Solutions Ma
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 208.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR125269952249
 Amount of Each Receipt this Period 24.00
 Memo Item
 P/R Deduction (\$8.00 Bi-Weekly)

C. 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) VP, Diversity & Inclusion
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR125270252249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 160
<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 FEC ID C00332833

A. 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 ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR129786852249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Whisner, Emerson L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7512 Nature Way
 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) Mgr, Facilities_&_RE_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR129982652249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 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) VP, Prod Mgmt and Development
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR130358452249
 Amount of Each Receipt this Period 75.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	219.00
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 160
<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 FEC ID C00332833

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
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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 ▼
494.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

Transaction ID : PR130811152249

Amount of Each Receipt this Period
57.00

Memo Item

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

B. 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, Product and Solutions Mark
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
494.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

Transaction ID : PR130811752249

Amount of Each Receipt this Period
57.00

Memo Item

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

C. Brennan, Peter V, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 301 Harewood Place

City Fuquay-Varina	State NC	Zip Code 27526
-----------------------	-------------	-------------------

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 ▼
494.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

Transaction ID : PR130811852249

Amount of Each Receipt this Period
57.00

Memo Item

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

SUBTOTAL of Receipts This Page (optional).....▶	171.00
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 160
<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 FEC ID C00332833

A. Corwin, Kraig, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4429 Gaffney Ct
 City Columbus State OH Zip Code 43228
 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 ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR130812152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Johnston, Carla K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1784 Fairwood Avenue
 City Columbus State OH Zip Code 43207
 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR130812352249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. O'Gorman, Rodney J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 Big Flat Road
 City Missoula State MT Zip Code 59804
 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 ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR130812552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	117.00
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 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Aragon, Charles F, , ,			Date of Receipt
Mailing Address 1 Ocean Lane Apt. 2113			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Hilton Head Island	State SC	Zip Code 29928	Transaction ID : PR130812652249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Comm/Trans_(Atty)	<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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Schlissberg, Robert E, , ,			Date of Receipt
Mailing Address 7500 Ross Avenue			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Dublin	State OH	Zip Code 43017	Transaction ID : PR130812952249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="114.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) SVP, Commercial Enablement & Ana	<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="988.00"/>		P/R Deduction (\$38.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Glending, Michael J, , ,			Date of Receipt
Mailing Address 36422 Gosford Dr			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Avon	State OH	Zip Code 44011	Transaction ID : PR130813252249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="114.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Direct Sales 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="988.00"/>		P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="285.00"/>
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 23 OF 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Schorr, Ryan D, , ,			Date of Receipt
Mailing Address 243 Stone Canyon Ct			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Hinckley	State OH	Zip Code 44233	Transaction ID : PR130813352249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="114.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) SVP, Operations, CAH at Home Sol	<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="988.00"/>		P/R Deduction (\$38.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Upchurch, Laura, , ,			Date of Receipt
Mailing Address 46391 Winston Dr			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Shelby Twp	State MI	Zip Code 48315	Transaction ID : PR130814252249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Mgr, Nuclear Pharmacy	<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="260.00"/>		P/R Deduction (\$10.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Simmons, John, , ,			Date of Receipt
Mailing Address 2624 N Paulina St			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Chicago	State IL	Zip Code 60614	Transaction ID : PR130814552249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Direct_Sales 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="260.00"/>		P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="174.00"/>
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 24 OF 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Millar, Bruce M, , ,			Date of Receipt
Mailing Address 113 Jay Street			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Chittenango	State NY	Zip Code 13037	Transaction ID : PR130814752249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Operations 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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pintek, Michael F, , ,			Date of Receipt
Mailing Address 4510 W. Rapid Springs.			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Austin	State TX	Zip Code 78746	Transaction ID : PR130815752249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) SVP, Customer Operations & Busin	<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="1300.00"/>		P/R Deduction (\$50.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Crump, Randall G, , ,			Date of Receipt
Mailing Address 1031 Redfield Terrace			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Dunwoody	State GA	Zip Code 30338	Transaction ID : PR130863552249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Exec, Acct_Mgmt-Home Hlth	<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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="264.00"/>
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 25 OF 160
<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 FEC ID C00332833

A. English, Patricia M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 Circle on the Green
 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, Chief Accounting Officer
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR130884752249
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$20.00 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, GM - Opti-Freight
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR130967852249
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Froom, Karan E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4081 Hanover Square 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, Strategic Plng/Execut
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131026452249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	267.00
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 160
	<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 FEC ID C00332833

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, Engineering Mngmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR13102652249
 Amount of Each Receipt this Period 90.00
 Memo Item
 P/R Deduction (\$30.00 Bi-Weekly)

B. Schmidt, Barbara E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6072 N. Reliance Dr
 City Tucson State AZ Zip Code 85704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Account Mgmt
 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 / 2020
Transaction ID : PR131179852249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Reschke, Sara J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 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, Prod Mgmt and Dev
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131180052249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	177.00
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 160
<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 FEC ID C00332833

A. Keane, 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, Sply Chain Inv/Purchasing
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131180252249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Sovoda, Sidney F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3500 Lakeview Dr.
 City Frenchtown Twp. State MI Zip Code 48162
 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131180552249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. 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) VP, Direct Sales Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131180852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	171.00
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 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Futch, Jeff B, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020 Transaction ID : PR131180952249
Mailing Address 401 Guadalupe St APT 2102			Amount of Each Receipt this Period 30.00
City Austin	State TX	Zip Code 78701	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, New Bus Sls - Tec Serv	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Perrone, Christopher, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020 Transaction ID : PR131181252249
Mailing Address 1797 Myers Drive			Amount of Each Receipt this Period 30.00
City Streetsboro	State OH	Zip Code 44241	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Cnslt, Bus Mtrcs/Analytics	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Wingham, Matthew T, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020 Transaction ID : PR131181352249
Mailing Address 7260 Wilton Chase			Amount of Each Receipt this Period 57.00
City Dublin	State OH	Zip Code 43017	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Digital Marketing & Ecomm	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 494.00		

SUBTOTAL of Receipts This Page (optional).....▶	117.00
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 160
<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 FEC ID C00332833

A. Huckabey, Donald C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5106 Bressler 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) Director, Network and Payor Re
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131181652249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131181752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Dittman, John Q, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4791 Blue Church Road
 City Sunbury State OH Zip Code 43074
 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 ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131181952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	201.00
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 160
<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 FEC ID C00332833

A. Altieri, Luke, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28204 W Oviatt Rd
 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, Terr Mgmt - MedCons
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131195752249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Anna-Soisson, Kimberly S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17349 Polo Ridege Blvd.
 City Fairhope State AL Zip Code 36532
 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 ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131195852249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Bogard, Willia M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15709 Cherry Blossom Rd
 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) Prgm Dir, Prog/Proj Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131196352249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 117.00
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 160
<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 FEC ID C00332833

A. Boling, Lora J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2548 Hutcherson Ln
 City Elizabethtown State KY Zip Code 42701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Customer Service Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131196452249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Brady, William J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3617 S 203rd St
 City Omaha State NE Zip Code 68130
 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 ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131196552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Carr, Christopher M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7253 Hopewell 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) Mngr, Program Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131196752249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 160
<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 FEC ID C00332833

A. Clark, Andrew M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11064 SassafRAS Road
 City Lakeview State OH Zip Code 43331
 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 ▼ 494.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131196952249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Conley, Robert L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 812 Stewart Ave
 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) Mgr, Strategic Plng/Execution
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131197152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Crowe, Sandra M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 Gregg Ave
 City St. Louis State MO Zip Code 63139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Regulatory Mngmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131197452249
 Amount of Each Receipt this Period 57.00
 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 33 OF 160
<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 FEC ID C00332833

A. Czerniak, John A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1524 West Diversey Parkway
 City Chicago State IL Zip Code 60614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Directr, EH&S
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131197552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Dahm, Kurt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6363 Phoenix Park 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, Strategic Pric
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131197652249
 Amount of Each Receipt this Period 20.00
 Memo Item
 P/R Deduction (\$0.00 Bi-Weekly)

C. 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, Terr Mgmt-Home Hlth
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131198152249
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
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 160
<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 FEC ID C00332833

A. Gross, Adam L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4995 St. Andrews 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) Sr Engr, Software Engineering
 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 / 2020
Transaction ID : PR131198352249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Hakim, David L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2027 Stockman Circle
 City Folsom State CA Zip Code 95630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Cnslt, Terr Mgmt-Pharm Dist
 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 / 2020
Transaction ID : PR131198452249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 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, Prog/Proj Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131198652249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	117.00
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 160
<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 FEC ID C00332833

A. Hodges, Garry O, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 409 Sierra Pl
 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, Inventory Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131199052249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Klatt, Andrew J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3599 Cemetery Rd
 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) Mgr, Strat Src Indirect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131199652249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Mignogno, Hollis C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1624 Foxhall Road
 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, Security
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131199952249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	117.00
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 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Miller, Diane M, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020 Transaction ID : PR13120052249
Mailing Address 9650 Camarillo Circle			Amount of Each Receipt this Period 30.00
City Plain City	State OH	Zip Code 43064	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Comm_Bus_Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Nickel, Louis, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020 Transaction ID : PR131200552249
Mailing Address 17555 West Desert Sage Drive			Amount of Each Receipt this Period 30.00
City Goodyear	State AZ	Zip Code 85338	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Mgr, Regulatory_Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Pollock, Eric S, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020 Transaction ID : PR131200952249
Mailing Address 295 S Dawson Ave			Amount of Each Receipt this Period 57.00
City Bexley	State OH	Zip Code 43209	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Strategic Pricing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 494.00		

SUBTOTAL of Receipts This Page (optional).....▶	117.00
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 160
<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 FEC ID C00332833

A. Randolph II, Richard A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6529 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) Sr Cnslt, Terr Mgmt - MedCons
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131201152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Shatto, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 Gardenia St
 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) Dir, Sply Chain Inv/Purchasing
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131201852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Smith, Trisha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2760 County Road 26
 City Marengo State OH Zip Code 43334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Employee Relations & Labor
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131201952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	117.00
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 160
<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 FEC ID C00332833

A. Sordo, Marisel G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2140 SW 137th Place
 City Miami State FL Zip Code 33175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec,_Terr Mgmt-SpecPharm
 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 / 2020
Transaction ID : PR131202052249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Stark, Mark A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4468 Clausen Avenue
 City Western Springs State IL Zip Code 60558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Cnslt, Cust Contract Admin
 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 / 2020
Transaction ID : PR131202152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Strickland, Jerome, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13509 Geyer Springs Road
 City Little Rock State AR Zip Code 72206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Trusted_Advisement
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131202352249
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$10.00 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 39 OF 160
<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 FEC ID C00332833

A. 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 ▼ 390.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131202452249
 Amount of Each Receipt this Period 45.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

B. Touve, Jay A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 Raleigh 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) VP, Fin Planng & Analysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131202752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Valdez, Angela M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 King Ct
 City Green Brook State NJ Zip Code 08812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mngr, Customer Service Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131202852249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	132.00
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 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Wheatley, Joshua, , ,			Date of Receipt
Mailing Address 1729 LeConte Drive			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Maryville	State TN	Zip Code 37803	Transaction ID : PR131203152249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Terr Mgmt - Pharm 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="260.00"/>		P/R Deduction (\$10.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Willet, Debra A, , ,			Date of Receipt
Mailing Address 7418 Balfoure Circle			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Dublin	State OH	Zip Code 43017	Transaction ID : PR131203252249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="114.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Comm/Trans_(Atty)	<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="988.00"/>		P/R Deduction (\$38.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Sorbara, Stephen, , ,			Date of Receipt
Mailing Address 8754 Kaitlin Ct			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Mechanicsville	State VA	Zip Code 23116	Transaction ID : PR131216352249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Sr Cnslt, New Bus Sls-Tec Serv	<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="260.00"/>		P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="174.00"/>
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 41 OF 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Jasinski, Patricia L, , ,			Date of Receipt
Mailing Address 4591 Lisa Lane			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City North Royalton	State OH	Zip Code 44133	Transaction ID : PR131216452249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Customer Srv 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="260.00"/>		
			P/R Deduction (\$10.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rutan, Adam D, , ,			Date of Receipt
Mailing Address 2414 Triple Crown Crossing			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Powell	State OH	Zip Code 43065	Transaction ID : PR131216552249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Internal Audit-Finance	<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="260.00"/>		
			P/R Deduction (\$10.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Watt, Jason E, , ,			Date of Receipt
Mailing Address 17709 Sugarberry Ct			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Chesterfield	State MO	Zip Code 63005	Transaction ID : PR131216752249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Terr Mgmt - Pharm 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="260.00"/>		
			P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="90.00"/>
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 42 OF 160
	<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 FEC ID C00332833

A. Anderson, Michael H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10912 Miller Barber
 City El Paso State TX Zip Code 79936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dirctr, EH&S
 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 / 2020
Transaction ID : PR131216852249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Fishback, Richard A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2970 Wellesley 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) Engr, Software/Info Plat
 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 / 2020
Transaction ID : PR131216952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Loscalzo, Edward, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 Dianne Street
 City Seaford State NY Zip Code 11783
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131217152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 160
<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 FEC ID C00332833

A. Tous, Wendy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 779 Buchanan Rd
 City East Meadow State NY Zip Code 11554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Category Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131217252249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Watson, Clarke L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9110 Pinebreeze Dr
 City Riverview State FL Zip Code 33578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, IT Client Support
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131217952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Poojala, Chetan C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2135 Matthews View
 City Cumming State GA Zip Code 30041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131218052249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 160
<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 FEC ID C00332833

A. Balawender, Pamela D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 683 Sandy Lake Road
 City Kent State OH Zip Code 44240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mngr, Customer Service Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131218552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Strohl, Beth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 E. Cooke Rd
 City Columbus State OH Zip Code 43224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Advsr, E-Discovery
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131218652249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Mattson, Tracy C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1578 Stone Crossing St NE
 City Canton State OH Zip Code 44721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Cnslt, Cust Contract Admin
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131218752249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 160
<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 FEC ID C00332833

A. Connor, Rebecca M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 Franconia Circle
 City East Longmeadow State MA Zip Code 01028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Supv, Customer Service Mgmt
 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 / 2020
Transaction ID : PR131219152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. 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) VP, Comm/Trans_(Atty)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131219452249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. 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 ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131219552249
 Amount of Each Receipt this Period 57.00
 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 46 OF 160
<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 FEC ID C00332833

A. Resnick, Douglas J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2683 Hunters Ridge
 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, Billing CAH at Home
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131219752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. 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 ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131220052249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. 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 ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131220152249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	171.00
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 160
	<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 FEC ID C00332833

A. 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 ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131220452249
 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) VP, Info Security
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131220752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. 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, Deployment Leader
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131220952249
 Amount of Each Receipt this Period 57.00
 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 48 OF 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Cliff, Thomas M, , ,			Date of Receipt
Mailing Address 6970 Shady Nelms			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Dublin	State OH	Zip Code 43017	Transaction ID : PR131221352249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Software Engineering	<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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Adams, Natalie, , ,			Date of Receipt
Mailing Address 3005 Longridge Way			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Grove City	State OH	Zip Code 43123	Transaction ID : PR131221552249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Strat_Src Gbl Prods	<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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Gainer, Natalie A, , ,			Date of Receipt
Mailing Address 2014 Philzer St NW			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City North Canton	State OH	Zip Code 44720	Transaction ID : PR131221652249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Software Engineering	<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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="171.00"/>
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 49 OF 160
<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 FEC ID C00332833

A. 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131221752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Rossettie, Mary Kate, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5476 Valerio Trail
 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) VP, Direct Sales Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131221852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. 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, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131222352249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	171.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 160
<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 FEC ID C00332833

A. 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, Manufacturing Mgt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131222452249
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

B. 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) VP, Territory Sales - Dist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131222552249
 Amount of Each Receipt this Period 114.00
 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/Info Plat
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131223052249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 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 51 OF 160
<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 FEC ID C00332833

A. Bacon, Jackie D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6592 County Rd 437
 City Princeton State TX Zip Code 75407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Cnslt, Clinical Ops
 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 / 2020
Transaction ID : PR131262952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Barnett, Harvey L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 193-11 McLaughlin Ave
 City Holliswood State NY Zip Code 11423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, 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 / 2020
Transaction ID : PR131263152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Blackburn, Brent, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9690 Mission Drive
 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) Mgr, Software Engineering
 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 / 2020
Transaction ID : PR131263452249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 160
<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 FEC ID C00332833

A. Bruce, Darrin E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20400 Hoover Bault Rd
 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) Dir, Cloud Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131263552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Clark, Timmy D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 543 CR 4810
 City Troup State TX Zip Code 75789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Prin Engr, Process
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131263752249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Dubois, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1871 Orangelake 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) Dir, Software/Info Plat
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131264252249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 160
<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 FEC ID C00332833

A. Ishmael, Michael J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9578 Creighton Drive
 City Powell State OH Zip Code 27310
 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 ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131264652249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 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 ▼ 494.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131264752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Caruso, Debra A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 593 Denmoor Ct.
 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) Mgr, Blck Blt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131264952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	117.00
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 160
<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 FEC ID C00332833

A. Lewis, Terrie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5945 Muncie Ct
 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) Advisor, IT Risk and Compl Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131265252249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Minshull, Stephen P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1828 W. Frye Road
 City Phoenix State AZ Zip Code 85045
 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 ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131266152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Palmer, James C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 Reller Drive
 City Old Monroe State MO Zip Code 63369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Cust Profit & Deal Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131266552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 160
<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 FEC ID C00332833

A. Sacher, William E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2576 Lockport Rd
 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 ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131266952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Sanders, Anthony L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2619 Lincoln Lane
 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, Operations Anlytcs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131267052249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Schaaf, Eric R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7328 Clover Park 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) Cnslt, Bus Analysis
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131267152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	117.00
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 160
<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 FEC ID C00332833

A. Schmol, Michelle G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 Washington Ave
 City Cuyahoga Falls State OH Zip Code 44221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Site Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131267252249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Springmeyer, Eugene M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 Spencer Place
 City St Peters State MO Zip Code 63376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Cnslt, Transportation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131267452249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Suba, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6299 Newgrange 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 Engineering
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131267552249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 117.00
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 160
<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 FEC ID C00332833

A. Wierciak, Michael J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1658 Knightwood Ln
 City Ofallon State MO Zip Code 63366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Manager, Eniv H&S
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131267952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Wig, Matthew E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71E Liberty Commons 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) Sr Cnslt, Ops Technology
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131268052249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Cesiel, Helen S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36856 Heatherton Dr
 City Farmington State MI Zip Code 48335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Advisor, Fin Plng & Analysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131281952249
 Amount of Each Receipt this Period 10.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	70.00
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 160
<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 FEC ID C00332833

A. Snapp, Kelly A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 87 Belle Meade St.
 City Grosse Pointe Shores State MI Zip Code 48236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Cnslt, Acct Mgmt-PharmDist
 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 / 2020
Transaction ID : PR131282452249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Wolfe, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6203 Ethan Lane
 City Amarillo State TX Zip Code 79109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Cnslt, Terr Mgmt-Pharm Dist
 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 / 2020
Transaction ID : PR131282952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. McLaughlin, Michael W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Walker Rd.
 City Manchester State MA Zip Code 01944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Direct_Sales Mgmt
 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 / 2020
Transaction ID : PR131283252249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 160
<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 FEC ID C00332833

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) Mgr, Territory Sales - Dist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131283352249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Rohrberg, 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, Creative Svcs
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131283652249
 Amount of Each Receipt this Period 57.00
 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131283852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	171.00
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 160
<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 FEC ID C00332833

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, Account_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131284352249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. 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) Exec, New_Bus Sls-Home Hlth
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131284552249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Boon, Adam D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5817 Waterbury Circle
 City Des Moines State IA Zip Code 50312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Health System Pharm
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131284852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 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 61 OF 160
<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 FEC ID C00332833

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 Sls - Outbound
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131284952249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Olson, Christopher E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4429 Sterling Pointe Drive NW
 City Kennesaw State GA Zip Code 30152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Business Perf Ptrn
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131285152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. 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, Deployment Leader
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131285252249
 Amount of Each Receipt this Period 57.00
 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 62 OF 160
<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 FEC ID C00332833

A. 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131285352249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131285452249
 Amount of Each Receipt this Period 57.00
 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) Exec,New Bus Sls -Services
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131285652249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	171.00
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 160
	<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Pena, Juan C, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020
Mailing Address c/o Cardinal Health 5000 SW 75th Ave Suite 121		Transaction ID : PR131285852249
City Miami	State FL	Zip Code 33155
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer (for Individual) CARDINAL HEALTH, INC	Occupation (for Individual) Dir, Bus Metric/Analytics	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	P/R Deduction (\$25.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dritz, Joshua S, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020
Mailing Address 1300 Rissler Lane		Transaction ID : PR131285952249
City Delaware	State OH	Zip Code 43015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.00
Name of Employer (for Individual) CARDINAL HEALTH, INC	Occupation (for Individual) Dir, Ops Technlgy	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00	P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Britt, Leila M, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020
Mailing Address 900 S Alhambra Circle		Transaction ID : PR131286052249
City Coral Gables	State FL	Zip Code 33146
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) CARDINAL HEALTH, INC	Occupation (for Individual) VP, Territory 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 ▼ 260.00	P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	162.00
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 160
<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 FEC ID C00332833

A. Sims, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 437 Enclave Circle Apt # 304
 City Costa Mesa State CA Zip Code 92626
 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 ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131286152249
 Amount of Each Receipt this Period 57.00
 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,New Bus Sls-PharmDist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131286252249
 Amount of Each Receipt this Period 57.00
 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 ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131286352249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	171.00
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 160
<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 FEC ID C00332833

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) Dir, Finance Ops
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131286452249
 Amount of Each Receipt this Period 57.00
 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) Directr, EH&S
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131286552249
 Amount of Each Receipt this Period 57.00
 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131286752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	171.00
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 160
<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 FEC ID C00332833

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) Director, Account Management
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131287152249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Finley, Scott C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 144 Highland Rd.
 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) Sr Cnslt, Advanced Analytics
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131287552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Hugg, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3537 E. Bridgeport Parkway
 City Gilbert State AZ Zip Code 85295
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Benefits
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131287752249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	117.00
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 160
<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 FEC ID C00332833

A. Matthew, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8514 Eagle Brook Drive
 City Land O' Lakes State FL Zip Code 34638
 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 ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131287952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. D'Accione, Matthew A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 153 Garvins Lane
 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) Mngr, Warehouse Operations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131288052249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Marr, Ryan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9553 Alder Glen 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) Mngr, Strategic Pricing
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 208.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131288352249
 Amount of Each Receipt this Period 24.00
 Memo Item
 P/R Deduction (\$8.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	84.00
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 160
<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 FEC ID C00332833

A. Vizzerra, Raymond O, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 W Highland Ct
 City Chandler State AZ Zip Code 85224
 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 ▼ 260.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : PR131288452249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Cooney, Pamela C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5835 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, Operations_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : PR131288652249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 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 ▼ 494.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : PR131288752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	117.00
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 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Johnstone, Jason, , ,			Date of Receipt
Mailing Address 2490 Buttercup Ct.			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Sunbury	State OH	Zip Code 43074	Transaction ID : PR131288852249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Mgr, Operations Mngmt	<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="260.00"/>		
			P/R Deduction (\$10.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Brewer, Laura J, , ,			Date of Receipt
Mailing Address 10629 SE 244th St			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Kent	State WA	Zip Code 98030	Transaction ID : PR131288952249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Mgr, Regulatory_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="260.00"/>		
			P/R Deduction (\$10.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Sullivan, Glenn P, , ,			Date of Receipt
Mailing Address 149 E. Main St. PO Box 611			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Saint Paris	State OH	Zip Code 43072	Transaction ID : PR131289152249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
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="494.00"/>		
			P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="117.00"/>
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 70 OF 160
<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 FEC ID C00332833

A. Myers, Aaron D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7570 Storrington Pl
 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) Mgr, Software Engineering
 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 / 2020
Transaction ID : PR13128952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Bleyle, Gregory W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6049 Morganwood Sq
 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, Tax
 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 / 2020
Transaction ID : PR131289752249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Alcantar, Reva R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 Pamela Court
 City Santa Paula State CA Zip Code 93060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Terr Mgmt - Services
 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 / 2020
Transaction ID : PR131290252249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 160
<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 FEC ID C00332833

A. Bernardo, Zachary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3117 Hines Rd
 City Columbus 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) Cnslt, Agile Coaching
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131290552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Whittington, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 331 Annie Drive
 City Oneonta State AL Zip Code 35121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Cnslt, Account Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131290952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Barbour, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7714 Green Path Ct
 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 Mtrcs/Analytics
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131291152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 160
<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 FEC ID C00332833

A. Clayton, Christopher D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4240 Landhigh Lakes
 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) Sr Advsr, E-Discovery
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131291352249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Click, Charlotte M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5682 Boucher Road
 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) Mgr, Learning_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131291452249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Senderovich, Yevgeniy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3203 Nostrand Avenue Apt. 5C
 City Brooklyn State NY Zip Code 11229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Engr, Software Engineering
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131291652249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 90.00
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 160
<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 FEC ID C00332833

A. Arora, Mohit, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9009 Bakircay 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) Mgr, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131291852249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Stevenson, Matthew J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2840 Elm Point Industrial Dr
 City Moscow Mills State MO Zip Code 63362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Supv, Warehouse Operations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131292352249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Fisher, Jason S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1715 Gingerfield Way
 City Sunbury State OH Zip Code 43074
 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 ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131292652249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 160
	<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 FEC ID C00332833

A. Weitzman, Deborah L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3214 River Highlands 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, Pharmaceutical Distributio
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131293152249
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Montalvo Ortiz, Michele, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Urb. Andreas Court #370 Calle 10 Apt 106 Bianca E 6
 City Trujillo Alto 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 Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131293252249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Combs, Kevin B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3090 Outlet Pkwy Apt. 202
 City Grand Prairie State TX Zip Code 75052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Supv, Warehouse Operations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131313152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	294.00
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 160
<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 FEC ID C00332833

A. 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) VP, Product and Solutions Market
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131313252249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. 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, Contract and Billing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131313452249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Kang, Charles H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57-42 229th Street
 City Oakland Gardens State NY Zip Code 11364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Engr, Software Engineering
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131314052249
 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 76 OF 160
<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 FEC ID C00332833

A. Kephire, Janice M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3127 Strong St
 City Highland State IN Zip Code 46322
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131314152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Schwieger, Douglas S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2691 Unbridled 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) Dir, Product and Solutions Mark
 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 / 2020
Transaction ID : PR131314652249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Squires, Peggy A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1909 Beltway
 City Saint Charles State MO Zip Code 63301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Cnslt, Terr Mgmt - Nuclear
 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 / 2020
Transaction ID : PR131314852249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 160
<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 FEC ID C00332833

A. Whidden, Zachary D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2087 Toad Hollow Trl
 City Apex State NC Zip Code 27502
 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 ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131315052249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Wyant, Michael B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4361 Buck Creek Road
 City Finchville State KY Zip Code 40022
 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 ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131315752249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. McElmeel, Joseph M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9718 Mid-Walk Drive
 City San Antonio State TX Zip Code 78230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Cnslt, Terr Mgmt - Lab
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131335752249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 160
<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 FEC ID C00332833

A. Baily, Robert C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3693 Audubon Ave.
 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) Mngr, Credit
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR131335952249
 Amount of Each Receipt this Period: 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. 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) Dir, Account_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR131336052249
 Amount of Each Receipt this Period: 57.00
 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 ▼ 988.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR131336352249
 Amount of Each Receipt this Period: 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 201.00
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 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Riegsecker, Gregory L, , ,			Date of Receipt
Mailing Address 3811 Vira Rd			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Stow	State OH	Zip Code 44224	Transaction ID : PR131336452249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Mgr, Contracts and Billing	<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="260.00"/>		P/R Deduction (\$10.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cieslak, Michael, , ,			Date of Receipt
Mailing Address 456 Saddle Lane			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Grosse Pointe Woods	State MI	Zip Code 48236	Transaction ID : PR131336552249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Mgr, Strategic 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="260.00"/>		P/R Deduction (\$10.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Schaffer, Devin K, , ,			Date of Receipt
Mailing Address 8710 Glenliven Ct			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Dublin	State OH	Zip Code 43017	Transaction ID : PR131337252249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, M & A_(Atty)	<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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="117.00"/>
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 80 OF 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Rakoc, John, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020 Transaction ID : PR131424552249
Mailing Address 115 Aspen Rd			Amount of Each Receipt this Period 30.00
City Swampscott	State MA	Zip Code 01907	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Cnslt, Account Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kvasnicka, Michael J, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020 Transaction ID : PR131424852249
Mailing Address 101 Market Street Apt 221			Amount of Each Receipt this Period 30.00
City San Diego	State CA	Zip Code 92101	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Mgr, Terr Mgmt - Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Anderson, Caley I, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020 Transaction ID : PR131425152249
Mailing Address 1892 S Terrace Dr			Amount of Each Receipt this Period 30.00
City Napa	State CA	Zip Code 94559	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Cnslt, Terr Mgmt - NonAcute	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 260.00		

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 160
<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 FEC ID C00332833

A. Lucero, Carl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3915 Linda Vista
 City Rio Rancho State NM Zip Code 87124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Supv, Nuclear Pharmacy
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131729352249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Balderas, Samantha V, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3922 FM 565 S
 City Baytown State TX Zip Code 77523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Cnslt, Customer Service Ops
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131881152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Lopez Cruz, Juan C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2605 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) Mgr, IT Network
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR131926852249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 82 OF 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Kartscher, Holly A, , ,			Date of Receipt
Mailing Address 6833 Welland Street			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Dublin	State OH	Zip Code 43017	Transaction ID : PR131948252249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Sr Spec, Account 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="260.00"/>		P/R Deduction (\$10.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Miller, Cathy M, , ,			Date of Receipt
Mailing Address 6230 Alligator Lake Shore E.			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City St Cloud	State FL	Zip Code 34771	Transaction ID : PR131948352249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Cnslt, Terr Mgmt - Lab	<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="260.00"/>		P/R Deduction (\$10.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Renner, Brian T, , ,			Date of Receipt
Mailing Address 15 W. Starr Avenue			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Columbus	State OH	Zip Code 43201	Transaction ID : PR131948652249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Finance 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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="117.00"/>
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 83 OF 160
<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 FEC ID C00332833

A. Shannon, Michael B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7851 Grandley Court
 City Reynoldsburg State OH Zip Code 43068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Accounting
 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 / 2020
Transaction ID : PR131948752249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Wayment, Joel J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 Seminole Ct
 City Goodlettsville State TN Zip Code 37072
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131948952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. 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, Corp/Securities_(Atty)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 988.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR131957952249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	174.00
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 160
<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 FEC ID C00332833

A. 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
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131965252249
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Halterman, Thomas L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1842 Glen Oaks Dr
 City West Des Moines State IA Zip Code 50266
 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 ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131965352249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. McGrath, Rebecca F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 633 C St NE
 City Washington State DC Zip Code 20002
 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 ▼ 1300.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR131978652249
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	414.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 85 OF 160
<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 FEC ID C00332833

A. Pritchard, Christine C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6812 Spring Run Drive
 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, Talent Mgt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR132002552249
 Amount of Each Receipt this Period: 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Maxwell III, James A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10775 Rushden 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) Dir, Product and Solutions Mark
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR132043752249
 Amount of Each Receipt this Period: 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Roy, John M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9439 Wilbrook 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, Category Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR132097052249
 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 86 OF 160
	<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 FEC ID C00332833

A. Turner, Alysia A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12951 Lemur Lane
 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) Mgr, Marketing Mngmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : PR132337452249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Terault, Terri L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5703 384th St E
 City Eatonville State WA Zip Code 98328
 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 ▼ 260.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : PR132337552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Chesler, Adam S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9205 Middle Glen Drive
 City Dallas State TX Zip Code 75243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Reg Affairs
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : PR132337852249
 Amount of Each Receipt this Period 57.00
 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 87 OF 160
	<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 FEC ID C00332833

A. Shedden, Jasmine E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 Arsenal Street # 484
 City Watertown State MA Zip Code 02472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec,_Terr Mgmt-SpecPharm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR132338152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Huyser, Brittany E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37005 Carla Court
 City Farmington Hills State MI Zip Code 48335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Cnslt, Sply Chain Inv/Purchas
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR132476052249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. White, Roger C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10103 Sandhill Pine Ct
 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) Exec,New_Bus Sis-PharmDist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR132976852249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Fett, Gregory D, , ,			Date of Receipt
Mailing Address 9216 Golden Rose Way			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Dublin	State OH	Zip Code 43017	Transaction ID : PR132976952249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Talent 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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McCormack, Douglas S, , ,			Date of Receipt
Mailing Address 16785 Raintree Drive			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Marysville	State OH	Zip Code 43040	Transaction ID : PR132977052249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, QRA Mngmt	<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="260.00"/>		P/R Deduction (\$10.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Catlett, Conni D, , ,			Date of Receipt
Mailing Address 5739 Timber Top Dr			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Hilliard	State OH	Zip Code 43026	Transaction ID : PR133108652249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Marketing_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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="144.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**SCHEDULE A (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 160
<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 FEC ID C00332833

A. Garnette, Jill D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 Catherine St
 City Nyack State NY Zip Code 10960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Cnslt, Acct Mgmt - Lab
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR133108852249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Foust, Hollie K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4755 Highlands 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) SVP, Compliance
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR133109052249
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Peitrowski, Kimberly L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 Lochmoor Blvd Grosse
 City Pointe Woods State MI Zip Code 48236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Terr Mgmt - Home Hlth
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR133318752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	237.00
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 160
<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 FEC ID C00332833

A. Zawilla, Andrew K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8875 Davington 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) VP, Account Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR133318852249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Weathers, Jamie R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2362 Broadway St.
 City Nolensville State TN Zip Code 37135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Terr Mgmt - SpecPharm
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR133318952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. McGraw, Ryan P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7702 Fulmar 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) VP, Asc_Gen_Csl,_Labor/Employ
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR133363552249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	258.00
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 160
<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 FEC ID C00332833

A. Steinberg, James E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4767 Vista Ridge 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, Strategy & Corp Devel
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR133363852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Doelker, Jeffery M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19369 Fairlane Ct
 City Livonia State MI Zip Code 48152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Cnslt, Terr Mgmt - MedCons
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR133408652249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Nestor, Jeanine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1645 Victoria Circle
 City Vero Beach State FL Zip Code 32967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Cnslt, Terr Mgmt - MedCons
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR133408852249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	117.00
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 160
<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 FEC ID C00332833

A. Graves, Adam J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2535 Viola Gill Lane
 City Wildwood State MO Zip Code 63040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, New Bus Sls - NonAcute
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR133409052249
 Amount of Each Receipt this Period 45.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

B. Lombardo, Susan J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3469 N Riley Place
 City Hurst State TX Zip Code 76054
 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 ▼ 650.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR133449152249
 Amount of Each Receipt this Period 75.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

C. Marshall, Larry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12862 SW 184th Terrace
 City Miami State FL Zip Code 33177
 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR133449252249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	177.00
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 160
<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 FEC ID C00332833

A. Revish, Jerome C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4383 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) SVP, Customer Service
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : PR133449352249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Dertinger, James K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4373 Beech Wood 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, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : PR133449452249
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

C. Nelson, Clifford E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1673 Old Brodhead Rd
 City Monaca State PA Zip Code 15061
 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 ▼ 260.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : PR133449552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 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 94 OF 160
<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 FEC ID C00332833

A. Hoover, James R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9031 Killochan 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, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR133449652249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Delewski, Dustin Y, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 Mill St. Apt 411
 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, Bus Intgrtion
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR133457052249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Schuster III, Russell E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9883 Gleneagle Pl
 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) Region President, Medical Segmen
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR133457152249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 95 OF 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Chin, Edmond, , ,			Date of Receipt
Mailing Address 605 North High Street #118			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Columbus	State OH	Zip Code 43215	Transaction ID : PR133748152249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Pharmacist II, Nuclear	<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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Danner Rodriguez, Shirley J, , ,			Date of Receipt
Mailing Address URB Ciudad Jardin Gurabo Los Altos #204			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Gurabo	State PR	Zip Code 00778	Transaction ID : PR148483152249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, QRA 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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Medina Vazquez, Ingrid, , ,			Date of Receipt
Mailing Address Urb. Las Ramblas 74 Calle Valls Taberner			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Guaynabo	State PR	Zip Code 00969	Transaction ID : PR148483252249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Health System Pharmcy	<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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="171.00"/>
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 96 OF 160
<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 FEC ID C00332833

A. Holcomb, Michele A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 538 S. 6th 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) EVP, Chief Strategy & Business D
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2020
Transaction ID : PR148558952249
 Amount of Each Receipt this Period 576.90
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. Dennis, David D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7773 Cromwell End
 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 PIng/Exec
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR148559052249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Wolski, Susan L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 Parkview Dr
 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) Dir, Sales Ops Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR148779252249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	663.90
TOTAL This Period (last page this line 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 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Bradley, Jill E, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020 Transaction ID : PR148779452249
Mailing Address 4832 Bass Point Rd.			Amount of Each Receipt this Period 30.00
City Orlando	State FL	Zip Code 32820	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 260.00	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Cnslt, Terr Mgmt - MedCons	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fleischacker, Shane T, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020 Transaction ID : PR148780052249
Mailing Address 4056 Haystack Way			Amount of Each Receipt this Period 57.00
City Roseville	State CA	Zip Code 95747	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 494.00	P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Operations_Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Wilson, Joseph P, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020 Transaction ID : PR148780352249
Mailing Address 5135 E. Weldon Ave			Amount of Each Receipt this Period 57.00
City Phoenix	State AZ	Zip Code 85018	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 494.00	P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Cnslt, Terr Mgmt - NonAcute	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

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 98 OF 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Maldonado Burdette, Enid, , ,			Date of Receipt
Mailing Address 11 Chalets del Bulevar			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Ponce	State PR	Zip Code 00730	Transaction ID : PR148780452249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Director, Pharmacy	<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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wells, Kevin A, , ,			Date of Receipt
Mailing Address 2243 Lila Way			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Columbus	State OH	Zip Code 43235	Transaction ID : PR148855352249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Sr Spec, Account 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="260.00"/>		P/R Deduction (\$10.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Pedra, Christi M, , ,			Date of Receipt
Mailing Address 29010 Marcello Way			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Naples	State FL	Zip Code 34110	Transaction ID : PR148980252249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Strtgc PIng/Execution	<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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="144.00"/>
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 99 OF 160
<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 FEC ID C00332833

A. Richardson, Hannah L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1327 McDermott Road
 City Pylesville State MD Zip Code 21132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Advisor, Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR149811552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. McMahon, Michael J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 Dorchester Way Apt 419
 City Grandview Height 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, Territory Sales - Dist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR150417652249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Getzender, Steven E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1440 Dale Ford 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) Cnslt, Bus Analysis
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR150417752249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Oakley, Kent, , ,			Date of Receipt
Mailing Address 5797 Glendavon Loop			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Dublin	State OH	Zip Code 43016	Transaction ID : PR150417852249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, IT Prog/Proj 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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pitcher, Heather L, , ,			Date of Receipt
Mailing Address 767 Emmons Ave			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Birmingham	State MI	Zip Code 48009	Transaction ID : PR150417952249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Category_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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Parsley, Brian L, , ,			Date of Receipt
Mailing Address 316 West Maple Street			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Granville	State OH	Zip Code 43023	Transaction ID : PR150477752249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Directr, EH&S	<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="260.00"/>		P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="144.00"/>
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 101 OF 160
<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 FEC ID C00332833

A. Hoffman, Robin M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7825 Jaymes Street
 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, Comm_Bus_Partner
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR150477852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Marsh, Clinton J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1643 Hollyhock Dr.
 City Celina State TX Zip Code 75009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Clncl Ops Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR150762752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Halligan, Sean P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8188 Tillinghast 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) SVP, Pharma Supply Chain Operati
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR150762952249
 Amount of Each Receipt this Period 450.00
 Memo Item
 P/R Deduction (\$150.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	564.00
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 160
<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 FEC ID C00332833

A. Lefever, Bret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 705 Maketewah Dr
 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) Mgr, Terr Mgmt-Pharm Dist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR150947352249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Mitchell, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 345 Pacific Drive
 City Mountain View State CA Zip Code 94043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Mnfrtrng Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR150947552249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Holmes, Sharon W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 Reservoir Way
 City Brandon State MS Zip Code 39047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec,New Bus Sls-PharmDist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR150948052249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	174.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 103 OF 160
<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 FEC ID C00332833

A. Diaz, Pedro L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11110 NW 11th Terrace
 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) VP, R & D Engr Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR150948152249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Rajalingam, Robert J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1909 Topaz Drive
 City Chanhassen State MN Zip Code 55317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Pres, US Sales, Med Solutions
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR151450752249
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Fister, Bruce D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7465 Maynooth 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, Bus Intgrtion
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR151511752249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	294.00
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 160
<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 FEC ID C00332833

A. Hug, Jennifer J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 144 E. Colonial Hwy
 City Hamilton State VA Zip Code 20158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Terr Mgmt - Pharm Dist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR151511852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Hodge, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 Sapphire Drive
 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) Mgr, Account Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR151511952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Kempton, Amber M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6178 Temple Ridge 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, Global Finance Shared Serv
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR151512052249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	117.00
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 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Hurley, Andrea L, , ,			Date of Receipt
Mailing Address 2727 Northwest Blvd			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Columbus	State OH	Zip Code 43221	Transaction ID : PR151512352249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Internal Audit-Finance	<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="260.00"/>		
			P/R Deduction (\$10.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Barber, David L, , ,			Date of Receipt
Mailing Address 6163 Turvey Loop W			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Dublin	State OH	Zip Code 43016	Transaction ID : PR151512552249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="300.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) EVP, Quality & Regulatory	<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="2600.00"/>		
			P/R Deduction (\$100.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Brantl, Karen R, , ,			Date of Receipt
Mailing Address 98 Prospect Avenue			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City West Springfield	State MA	Zip Code 01089	Transaction ID : PR151512652249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Sr Prin Engr, R & D	<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="260.00"/>		
			P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="360.00"/>
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 106 OF 160
<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 FEC ID C00332833

A. Pellicciarini, David W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6938 Verde Ridge Rd
 City Rancho Palos Verdes State CA Zip Code 90275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Reg Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR151865452249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Lewis, Jennifer L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6016 PenningtonCreek
 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_Support_Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 532.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR152096552249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Wallon, Stephen T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3116 Grantham Drive
 City Richardson State TX Zip Code 75082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Sales Operations Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR152096652249
 Amount of Each Receipt this Period 57.00
 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 107 OF 160
<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 FEC ID C00332833

A. Balistrere, Vita, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 Pickett 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) Dir, Account_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR152096752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Kerrick, Brooks S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2509 Ridge Rd.
 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) Dir, Business Intelligence
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR152096852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Moffett, Kelley M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1296 Tremont Street
 City Duxbury State MA Zip Code 02332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Product and Solutions Market
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR152097052249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	171.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 108 OF 160
<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 FEC ID C00332833

A. Parsons, David A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 Baron Drive
 City North Easton State MA Zip Code 02356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Product and Solutions Market
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR152097152249
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Patel, Harish A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 Bretts Farm Road
 City Norfolk State MA Zip Code 02056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Resrch Fellow
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR152097252249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Wiesner, Joel D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 Copley Square
 City Ofallon State MO Zip Code 63366
 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 ▼ 494.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR152097352249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	264.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 109 OF 160
<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 FEC ID C00332833

A. Motika, Christopher J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33062 Seawatch
 City Dana Point State CA Zip Code 92629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Terr Mgmt - MedCons
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR152097452249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Bradley, Collyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Santuit St. A
 City Boston State MA Zip Code 02124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Business Perf Ptnr
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR152097552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Coatney, Nancy E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5750 N Fairfield Ave
 City Chicago State IL Zip Code 60659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Terr Mgmt - Pharm Dist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 513.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR152097652249
 Amount of Each Receipt this Period 76.00
 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 110 OF 160
<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 FEC ID C00332833

A. Blue, Elizabeth L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4381 Ingham Ave
 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, Fin Plannng & Analysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR152097752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Matthews, Ahmar R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5411 Bowmanville Ave
 City Chicago State IL Zip Code 60625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Trusted Advisement
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR152097852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Hoyer, Samantha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1504 Guilford 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, Mktg Management
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR152097952249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	171.00
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 111 OF 160
<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 FEC ID C00332833

A. Toscano, June O, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1148 Hooverview Drive
 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, Brand Strategy
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR152098052249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Sidhu, Preety K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1119 E Rich St
 City Columbus State OH Zip Code 43205
 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 ▼ 1300.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR152098152249
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Robinson, Wayne R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2806 Aviamar Circle
 City Naples State FL Zip Code 34114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Tax
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR152098252249
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	357.00
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 112 OF 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Mo, Chunhui, , ,			Date of Receipt
Mailing Address 8115 Coldwater Drive			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Powell	State OH	Zip Code 43065	Transaction ID : PR152098452249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Strat Plng/Execution	<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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wolf, Andrew D, , ,			Date of Receipt
Mailing Address 5558 Main St			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Downers Grove	State IL	Zip Code 60516	Transaction ID : PR152098652249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Exec,_Acct Mgmt - MedCons	<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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Barnhart, Toby S, , ,			Date of Receipt
Mailing Address 522 San Lorenzo Avenue			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Coral Gables	State FL	Zip Code 33146	Transaction ID : PR152098752249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="576.90"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Pres, Global Manufacturing & Sup	<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="4999.80"/>		P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="690.90"/>
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 113 OF 160
<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 FEC ID C00332833

A. Constable, Nathan A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 Watson 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) Mgr, Government Relations
 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 / 2020
Transaction ID : PR152098852249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Crawford, Victor L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10824 Lockland Drive
 City Potomac State MD Zip Code 20854
 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 ▼ 4999.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR152098952249
 Amount of Each Receipt this Period 576.90
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

C. Morrison, Kelly L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7523 Guinevere Dr.
 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) Dir, Pharmacy Ops Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR152305752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	663.90
TOTAL This Period (last page this line 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 160
<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 FEC ID C00332833

A. Frank, Jessica M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2255 152nd Street
 City Winterset State IA Zip Code 50273
 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR152305852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Moran, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7336 Pueblo 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, Investor Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR152305952249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Aughtman, Wendy N, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1844 SW 23rd TER
 City Miami State FL Zip Code 33145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec,_Terr Mgmt-SpecPharm
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR152306052249
 Amount of Each Receipt this Period 57.00
 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 115 OF 160
<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 FEC ID C00332833

A. Snow, Ola M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 267 Donerail Ave
 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) Chief Human Resources Officer
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2020
Transaction ID : PR152755852249
 Amount of Each Receipt this Period 576.90
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. Gillespie, Lauren L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1013 Weldin Circle
 City Wilmington State DE Zip Code 19803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec,_Terr Mgmt-SpecPharm
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR153007052249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Cannon, Jessica E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1270 Carron Drive
 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) VP, Community Relations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR153007152249
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	783.90
TOTAL This Period (last page this line 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 160
<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 FEC ID C00332833

A. Rice, Brian S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1126 N. Willow Beach Drive
 City Augusta State MI Zip Code 49012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) EVP, Chief Information Officer a
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2020
Transaction ID : PR153186852249
 Amount of Each Receipt this Period 576.90
 Memo Item
 P/R Deduction (\$192.30 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 ▼ 1175.20

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87377752249
 Amount of Each Receipt this Period 135.60
 Memo Item
 P/R Deduction (\$45.20 Bi-Weekly)

C. Kerski, Christopher D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 728 Lexington Ave.
 City Coppell State TX Zip Code 75019
 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 ▼ 1040.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87378652249
 Amount of Each Receipt this Period 120.00
 Memo Item
 P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	832.50
TOTAL This Period (last page this line 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 160
<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 FEC ID C00332833

A. Kahn, Cheryl M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3049 Maple Leaf
 City Glenview State IL Zip Code 60026
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR87379052249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. 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 ▼ 698.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR87379452249
 Amount of Each Receipt this Period 80.55
 Memo Item
 P/R Deduction (\$26.85 Bi-Weekly)

C. 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 ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR87379952249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	167.55
TOTAL This Period (last page this line 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 160
<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 FEC ID C00332833

A. 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, Acct Mngmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 351.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87380152249
 Amount of Each Receipt this Period 40.50
 Memo Item
 P/R Deduction (\$13.50 Bi-Weekly)

B. Carnes, Elizabeth R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12238 Ivy Ridge 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) Exec,_Acct Mgmt - MedCons
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87380352249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. Thompson, Benjamin T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1244 Edgemere Drive
 City Keller State TX Zip Code 76248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Product & Services Sales
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87381452249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	268.50
TOTAL This Period (last page this line 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 160
<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 FEC ID C00332833

A. Beeler, Laurel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1723 Eagle Trl
 City Oxford State MI Zip Code 48371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec,_Acct Mgmt - MedCons
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87382052249
 Amount of Each Receipt this Period 75.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

B. France, Michael W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5855 Durrett Road
 City Orient State OH Zip Code 43146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Sr Prod Mgr, Prod Mgmt and Dev
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 208.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87383652249
 Amount of Each Receipt this Period 24.00
 Memo Item
 P/R Deduction (\$8.00 Bi-Weekly)

C. Lanctot, Christopher F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7276 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) SVP, Retail Independent Sales
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87384252249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 129.00
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 160
<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 FEC ID C00332833

A. Spirko, Kate C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 532 Ely Court N.
 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 Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 988.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR87385152249
 Amount of Each Receipt this Period
 114.00
 Memo Item
 P/R Deduction (\$38.00 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 and Solutions Marke
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR87386052249
 Amount of Each Receipt this Period
 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Pitteroff, Valerie C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6058 Joneswood 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, HR Business Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 988.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR87387352249
 Amount of Each Receipt this Period
 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	285.00
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 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Donnelly, Scott A, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020 Transaction ID : PR87387552249
Mailing Address 12659 Hickory Ridge Road			Amount of Each Receipt this Period 60.00
City Plain City	State OH	Zip Code 43064	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, GM (Gen Mgmt)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cadell, Ellery B, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020 Transaction ID : PR87387952249
Mailing Address 1392 Beaman Drive			Amount of Each Receipt this Period 30.00
City Columbus	State OH	Zip Code 43228	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Mgr, Engr Prog/Proj Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Farley, Paul G, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2020 Transaction ID : PR87388052249
Mailing Address 52 Onondeg Rd			Amount of Each Receipt this Period 57.00
City Narragansett	State RI	Zip Code 02882	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Accnt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 494.00	

SUBTOTAL of Receipts This Page (optional).....	147.00
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 122 OF 160
<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 FEC ID C00332833

A. 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, Medical Segment IT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87388552249
 Amount of Each Receipt this Period 300.00
 Memo Item
 P/R Deduction (\$100.00 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) Exec, Account
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87388552249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. 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, IT_Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 419.90

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87389152249
 Amount of Each Receipt this Period 48.45
 Memo Item
 P/R Deduction (\$16.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	405.45
TOTAL This Period (last page this line 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 160
<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 FEC ID C00332833

A. Smith, Andre D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7523 Guinevere Drive
 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) Dir, Pharm Ops & Acct Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR87389352249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Hume, Cheryl L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2762 Cannon Circle
 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, Sply Chain Inv/Purchasing
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 312.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR87389752249
 Amount of Each Receipt this Period 36.00
 Memo Item
 P/R Deduction (\$12.00 Bi-Weekly)

C. 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 ▼ 494.00

Date of Receipt **12 / 31 / 2020**
Transaction ID : PR87390652249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 124 OF 160
<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 FEC ID C00332833

A. 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 ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87390752249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. 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 ▼ 390.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87391052249
 Amount of Each Receipt this Period 45.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

C. 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 ▼ 275.08

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87391552249
 Amount of Each Receipt this Period 31.74
 Memo Item
 P/R Deduction (\$10.58 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	190.74
TOTAL This Period (last page this line 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 160
<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 FEC ID C00332833

A. Ginn, John O, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 595 Charleston Light
 City Loudon State TN Zip Code 37774
 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 ▼ 624.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87391652249
 Amount of Each Receipt this Period 72.00
 Memo Item
 P/R Deduction (\$24.00 Bi-Weekly)

B. 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87391852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. 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 Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87391952249
 Amount of Each Receipt this Period 120.00
 Memo Item
 P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	249.00
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 126 OF 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Cochran, Bradley G, , ,			Date of Receipt
Mailing Address 2589 Aikin Circle S			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Lewis Center	State OH	Zip Code 43035	Transaction ID : PR87392452249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="114.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) SVP, National Markets	<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="988.00"/>		P/R Deduction (\$38.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Stillings, Lisa A, , ,			Date of Receipt
Mailing Address 5833 Whitecraigs Ct			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Dublin	State OH	Zip Code 43017	Transaction ID : PR87392952249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Finance 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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Brannon, Jeffrey B, , ,			Date of Receipt
Mailing Address 3965 Clearlake Circle			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Zanesville	State OH	Zip Code 43701	Transaction ID : PR87393052249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="75.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Account_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="650.00"/>		P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="246.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**SCHEDULE A (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 160
<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 FEC ID C00332833

A. 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 ▼ 4999.80

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87393152249
 Amount of Each Receipt this Period 576.90
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. 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) SVP, Info Security
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87393252249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Godfrey, Tracy K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2576 McCumber
 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, Product and Solutions Mark
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87393352249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	690.90
TOTAL This Period (last page this line 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 160
<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 FEC ID C00332833

A. Zawadzki, Mark D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5932 Willshire 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 Png & Anlysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87393452249
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

B. Griest, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1284 Four Star Dr East
 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) Dir, Strat Src Natl Brands
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87393752249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Kaufmann, Michael C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 N. Riverview Street Unit 311
 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, Cardinal Health
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87393852249
 Amount of Each Receipt this Period 576.90
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	666.90
TOTAL This Period (last page this line 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 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Boggs, Gregory, , ,			Date of Receipt
Mailing Address 7746 Polo Lane			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Powell	State OH	Zip Code 43065	Transaction ID : PR87393952249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="114.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) SVP, EIT Shared Services	<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="988.00"/>		P/R Deduction (\$38.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Thomas, Angela M, , ,			Date of Receipt
Mailing Address 9287 Windy Creek Dr			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Columbus	State OH	Zip Code 43240	Transaction ID : PR87394052249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="60.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Account 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="520.00"/>		P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Ewing, Gregory A, , ,			Date of Receipt
Mailing Address 113 Elderberry Ct			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Pataskala	State OH	Zip Code 43062	Transaction ID : PR87394452249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) VP, Prod and Solutions Marketing	<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="260.00"/>		P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="204.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**SCHEDULE A (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 160
<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 FEC ID C00332833

A. Smith, Laura L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8635 Carter Road
 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, Sls Operations Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87394652249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. 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 ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87394752249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87394852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 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 131 OF 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Combs, James P, , ,			Date of Receipt
Mailing Address 352 Bass Lane			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Senecaville	State OH	Zip Code 43780	Transaction ID : PR87394952249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Execuve, Accnt	<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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pero, Brian V, , ,			Date of Receipt
Mailing Address 7794 Lanham Ct			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Dublin	State OH	Zip Code 43016	Transaction ID : PR87395152249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="45.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) SVP, General_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="390.00"/>		P/R Deduction (\$15.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Sells, Patrick A, , ,			Date of Receipt
Mailing Address 3460 Hyatts Rd			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Powell	State OH	Zip Code 43065	Transaction ID : PR87396152249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="114.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, HR Business Partner	<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="988.00"/>		P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="216.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**SCHEDULE A (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 160
<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 FEC ID C00332833

A. Ioannides, Theresa M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5975 Trafalgar Lane
 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 ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87396252249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 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) SVP, Global Operations Mgmt, Med
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87396652249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. 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,New_Bus Sls-PharmDist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 312.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87397152249
 Amount of Each Receipt this Period 36.00
 Memo Item
 P/R Deduction (\$12.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	180.00
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 160
<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 FEC ID C00332833

A. Scherer, Mary C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 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) SVP, Internal Audit-Finance
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87397352249
 Amount of Each Receipt this Period 45.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

B. 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 & Accnt Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87398052249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. 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 ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87398252249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 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 134 OF 160
	<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 FEC ID C00332833

A. Kullberg, Christine M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1499 Cardiff 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, Mktg Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87398552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Natsis, Elaine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4519 Ackerly Farm Road
 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, Corp/Secs (NonAtty)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87398652249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Janz, Teresa M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Varies By Worker
 City Wauwatosa State WI Zip Code 53226
 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 ▼ 234.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87398952249
 Amount of Each Receipt this Period 27.00
 Memo Item
 P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 87.00
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 135 OF 160
	<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 FEC ID C00332833

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 ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87399052249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. 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 & Alternate C:
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87399252249
 Amount of Each Receipt this Period 200.00
 Memo Item
 P/R Deduction (\$100.00 Bi-Weekly)

C. 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 PIng/Execution
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87399452249
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	464.00
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 160
<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 FEC ID C00332833

A. 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87399752249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. McTopy, Joel S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1506 Fairview Drive
 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) VP, Account (Enterprise Contrac
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87400552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Sherrer, Kendell F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 539 West 1st Avenue Unit #312
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) VP, Compensation & Benefits
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 528.06

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87400852249
 Amount of Each Receipt this Period 60.93
 Memo Item
 P/R Deduction (\$20.31 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	147.93
TOTAL This Period (last page this line 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 160
<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 FEC ID C00332833

A. 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) Manager Commercial Technologies
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87401152249
 Amount of Each Receipt this Period 45.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

B. 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87401452249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. 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 Mgt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87401652249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 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 138 OF 160
<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 FEC ID C00332833

A. Lane, Cornelius T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Southridge
 City St Louis State MO Zip Code 63122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Exec,New_Bus Sls-PharmDist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : PR87401852249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 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, Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : PR87401952249
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Polles, John P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 Knob Hill Circle
 City Canton State MA Zip Code 02021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Mgr, Terr Mgmt - Lab
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 12 / 31 / 2020
Transaction ID : PR87402252249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	210.00
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 160
<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 FEC ID C00332833

A. 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 ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR87402352249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. 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, Comm/Trans_(Atty)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR87402452249
 Amount of Each Receipt this Period 75.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

C. Cools, Kenneth J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9621 Show Jumper Ct
 City Wilton State CA Zip Code 95693
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR87402552249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	162.00
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 160
<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 FEC ID C00332833

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 ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87403352249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Brown, Carolyn S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13180 Beach Club Rd
 City The Colony 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) Exec,New Bus Sls-PharmDist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87403452249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. 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) SVP, Global Finance Shared Servi
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87404052249
 Amount of Each Receipt this Period 75.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	219.00
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 141 OF 160
<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 FEC ID C00332833

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 ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87404352249
 Amount of Each Receipt this Period 114.00
 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 3609 Sparrow Ct
 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 Plng & Anlysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87404552249
 Amount of Each Receipt this Period 57.00
 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) VP, Direct_Sales Mgmt
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87404652249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 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 142 OF 160
<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 FEC ID C00332833

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) SVP, Strategic Src Natl Brands
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87404952249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Rigel, Tricia L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5358 Agate Pl
 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, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87405852249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87406552249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	201.00
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 160
<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 FEC ID C00332833

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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87406852249
 Amount of Each Receipt this Period 57.00
 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) VP, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87407052249
 Amount of Each Receipt this Period 57.00
 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87407152249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 171.00
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 160
<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 FEC ID C00332833

A. Grubbs, Harold E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7802 Spencer Brook Dr
 City Summerfield State NC Zip Code 27358
 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 ▼ 312.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR87407252249
 Amount of Each Receipt this Period: 36.00
 Memo Item
 P/R Deduction (\$12.00 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 ▼ 494.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR87408252249
 Amount of Each Receipt this Period: 57.00
 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 ▼ 494.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR87408352249
 Amount of Each Receipt this Period: 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 145 OF 160
<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 FEC ID C00332833

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 ▼ 400.14

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87408652249
 Amount of Each Receipt this Period 46.17
 Memo Item
 P/R Deduction (\$15.39 Bi-Weekly)

B. Halvacs, Gregory J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61723 East Happy Jack Trail
 City Oracle State AZ Zip Code 85623
 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87409452249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 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, Employee Relations & Labor
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87409752249
 Amount of Each Receipt this Period 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	217.17
TOTAL This Period (last page this line 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 160
<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 FEC ID C00332833

A. 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 ▼ 1300.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR87410552249
 Amount of Each Receipt this Period: 150.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. Wehr, Andrew W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6705 Plumb 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, Env Hlth & Sfty
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR87410852249
 Amount of Each Receipt this Period: 57.00
 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, Manufacturing_Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1482.00

Date of Receipt: 12 / 31 / 2020
Transaction ID : PR87410952249
 Amount of Each Receipt this Period: 171.00
 Memo Item
 P/R Deduction (\$57.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	378.00
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 160
<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 FEC ID C00332833

A. Mayer, Jessica L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8397 Somerset 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) Chief Legal/Compliance Officer
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87411752249
 Amount of Each Receipt this Period 576.90
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. Forester, Cara D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6781 Lloyd 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) Dir, Comm Business Partner
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87412152249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Hall, Carl E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 775 Bennaville Ave
 City Birmingham State MI Zip Code 48009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) SVP, Sales, CAH at Home Solution
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87412552249
 Amount of Each Receipt this Period 45.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	651.90
TOTAL This Period (last page this line 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 160
<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 FEC ID C00332833

A. Halloran, Patrick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6180 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) Dir, Global Trade Ops Log
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87413452249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87413652249
 Amount of Each Receipt this Period 57.00
 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) VP, Software Engineering
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87414252249
 Amount of Each Receipt this Period 57.00
 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 149 OF 160
<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 FEC ID C00332833

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Colyer, Joel, , ,			Date of Receipt
Mailing Address 1903 Forestview Lane			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Delaware	State OH	Zip Code 43015	Transaction ID : PR87414752249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="30.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Prod Mgmt and Dev	<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="260.00"/>		P/R Deduction (\$10.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Vahedian, Tohid A, , ,			Date of Receipt
Mailing Address 2480 Onandaga Dr			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Upper Arlington	State OH	Zip Code 43221	Transaction ID : PR87416352249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="0.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) President, Cardinal Health Canada	<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="525.00"/>		P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Mangione, Michael J, , ,			Date of Receipt
Mailing Address 8971 Wicklow Manor			<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City Clarence	State NY	Zip Code 14032	Transaction ID : PR87416452249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="57.00"/>
Name of Employer (for Individual) CARDINAL HEALTH, INC		Occupation (for Individual) Dir, Terr Mgmt - Nuclear	<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="494.00"/>		P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="87.00"/>
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 150 OF 160
<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 FEC ID C00332833

A. Waters, Sean P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4505 East Broadway
 City Queen Creek State AZ Zip Code 85142
 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87417152249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 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, Sls
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87417452249
 Amount of Each Receipt this Period 150.00
 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, Pharm Ops & Acct Mgmt
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87417552249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	264.00
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 151 OF 160
<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 FEC ID C00332833

A. Callicott, Carroll 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87417852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. Andrews, David S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 916 E Cynthia Trail
 City Goodlettsville State TN Zip Code 37072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Pharmacist III, Nuclear
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87418052249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87418152249
 Amount of Each Receipt this Period 57.00
 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 152 OF 160
<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 FEC ID C00332833

A. Matheny, Georgann K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 591 Ridge Ave
 City Webster Groves State MO Zip Code 63119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Terr Mgmt - Nuclear
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87418752249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Boudreaux, Wayne J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 2nd Ave S, #444
 City St. Petersburg State FL Zip Code 33701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Dir, Phrm Ops & Accnt Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87418852249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Billman, Scott F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 Keswick Commons
 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, Technical Sale
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87419852249
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	117.00
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 160
<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 FEC ID C00332833

A. Russo, Alfredo S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 Bridle Drive
 City Wilmington State DE Zip Code 19810
 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87420152249
 Amount of Each Receipt this Period 57.00
 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87420252249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Watson, Richard W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3707 27th Ave SE
 City Puyallup State WA Zip Code 98374
 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 ▼ 260.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87420352249
 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 154 OF 160
	<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 FEC ID C00332833

A. Cheramie, Lane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 East 87th Street
 City Cut Off State LA Zip Code 70345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL HEALTH, INC Occupation (for Individual) Director, Pharmacy - Interim
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR87421652249
 Amount of Each Receipt this Period
 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. Helmreich, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6600 Deeside 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) Dir, Advanced Analytics
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR87421752249
 Amount of Each Receipt this Period
 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. 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,New Bus Sls -Services
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR87422352249
 Amount of Each Receipt this Period
 57.00
 Memo Item
 P/R Deduction (\$19.00 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 155 OF 160
<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 FEC ID C00332833

A. Zaluzney, Michelle M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43543 Michigan Sq
 City Leesburg State VA Zip Code 20176
 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87422452249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

B. 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 ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87422952249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

C. Medve, Stephen J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8153 Timble Falls 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, Talent Acquisition
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 12 / 31 / 2020
Transaction ID : PR87423352249
 Amount of Each Receipt this Period 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	171.00
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 160
<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 FEC ID C00332833

A. Honner, Robert A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7167 Springview Ln
 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, Fin Plannng & Analysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 988.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR93409152249
 Amount of Each Receipt this Period
 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

B. 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 ▼ 988.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR93689252249
 Amount of Each Receipt this Period
 114.00
 Memo Item
 P/R Deduction (\$38.00 Bi-Weekly)

C. 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 ▼ 494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : PR93938852249
 Amount of Each Receipt this Period
 57.00
 Memo Item
 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	285.00
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 157 OF 160
(check only one)

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

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NAME OF COMMITTEE (In Full)
Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC FEC ID C00332833

A. 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) VP, Advanced Analytics
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
494.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

Transaction ID : PR94090052249

Amount of Each Receipt this Period
57.00

Memo Item

P/R Deduction (\$19.00 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 ▼
520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

Transaction ID : PR99505252249

Amount of Each Receipt this Period
60.00

Memo Item

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

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	117.00
TOTAL This Period (last page this line number only).....	32232.42

**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 FEC ID C00332833

Full Name (Last, First, Middle Initial)

A. Kennedy For Massachusetts

Mailing Address PO Box 15

City Boston State MA Zip Code 02137

Purpose of Disbursement
Void - Joe Kennedy for Congress- lost

011

Candidate Name
Kennedy, Joseph, P., Rep., III

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MA District: 04

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2020

FEC Identification Number

C C00512970

Transaction ID : 12925879

Amount of Each Disbursement this Period

- 5000.00

Memo Item Void - Joe Kennedy for Congress- lost

Full Name (Last, First, Middle Initial)

B. 4 MA PAC

Mailing Address 185 Devonshire Street Suite 601

City Boston State MA Zip Code 02110

Purpose of Disbursement
Void - 4 MA PAC-lost

011

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2020

FEC Identification Number

C C00543504

Transaction ID : 12925880

Amount of Each Disbursement this Period

- 5000.00

Void - 4 MA PAC-lost

Memo Item

Full Name (Last, First, Middle Initial)

C. New Voice PAC

Mailing Address 35 East Gay Street Suite 403

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Void - New Voice PAC - lost

011

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2020

FEC Identification Number

C

Transaction ID : 12925881

Amount of Each Disbursement this Period

- 5000.00

Void - New Voice PAC - lost

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

- 15000.00

**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 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 FEC ID C00332833

Full Name (Last, First, Middle Initial)

A. Clarke For Congress

Mailing Address PO Box 250200

City Brooklyn State NY Zip Code 11225

Purpose of Disbursement
Void - Clarke For Congress - lost

011
Category/
Type

Candidate Name
Clarke, Yvette, D., Rep.,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NY District: 09

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2020

FEC Identification Number

C C00415331

Transaction ID : 12925882

Amount of Each Disbursement this Period

- 2500.00

Memo Item
Void - Clarke For Congress - lost

Full Name (Last, First, Middle Initial)

B. Friends Of Rosa Delauro

Mailing Address 129 Church St, Ste 818

City New Haven State CT Zip Code 06510

Purpose of Disbursement
Void - Friends Of Rosa Delauro - lost

011
Category/
Type

Candidate Name
DeLauro, Rosa, L., Rep.,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify)
State: CT District: 03

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2020

FEC Identification Number

C C00238865

Transaction ID : 12925883

Amount of Each Disbursement this Period

- 2500.00

Memo Item
Void - Friends Of Rosa Delauro - lost

Full Name (Last, First, Middle Initial)

C. Buddy Carter For Congress

Mailing Address PO Box 10570

City Savannah State GA Zip Code 31412

Purpose of Disbursement
Void - Buddy Carter For Congress - lost

011
Category/
Type

Candidate Name
Carter, Buddy, , Rep.,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: GA District: 01

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2020

FEC Identification Number

C C00543967

Transaction ID : 12925884

Amount of Each Disbursement this Period

- 2500.00

Memo Item
Void - Buddy Carter For Congress - lost

SUBTOTAL of Disbursements This Page (optional)..... ▶

- 7500.00

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

- 22500.00

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 FEC ID C00332833

Full Name (Last, First, Middle Initial)

A. Amy Walen for State House Surplus Account

Mailing Address PO Box 853

City
Redmond

State
WA

Zip Code
98033

Purpose of Disbursement
Void - Amy Walen for State House Surplus Account - lost

011

Category/
Type

Candidate Name

Walen, Amy, , WA Rep.,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			16			2020			

FEC Identification Number

C []

Transaction ID : 12925885

Amount of Each Disbursement this Period

[] - 1000.00

Memo Item Void - Amy Walen for State House Surplus Account - lost

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[]
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[]
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

[] - 1000.00

[] - 1000.00