

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

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

FOR LINE NUMBER: PAGE 136 OF 185

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

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

**A. Whidden, Andy, A, ,**

Mailing Address 6603 Chaucer Place SW  
Ocean Isle Beach

City State Zip Code  
Ocean Isle Beach NC 28469

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 ▼

456.00

Date of Receipt

11 / 30 / 2019

**Transaction ID : PR87381044366**

Amount of Each Receipt this Period

57.00

☐ Memo Item

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

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

**B. Thompson, Ben, T, ,**

Mailing Address 1244 Edgemere Drive  
Keller

City State Zip Code  
Keller TX 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 ▼

912.00

Date of Receipt

11 / 30 / 2019

**Transaction ID : PR87381444366**

Amount of Each Receipt this Period

114.00

☐ Memo Item

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

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

**C. Beeler, Laurel, , ,**

Mailing Address 1723 Eagle Trl  
Oxford

City State Zip Code  
Oxford MI 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 ▼

600.00

Date of Receipt

11 / 30 / 2019

**Transaction ID : PR87382044366**

Amount of Each Receipt this Period

75.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

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

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

246.00