

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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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. Elliott, Vernon E, , ,

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 ▼

209.00

Date of Receipt

05 / 31 / 2020

Transaction ID : PR125269748344

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. Filas, Melanie C, , ,

Mailing Address 1409 Riverwood Lane

City
Powell

State
OH

Zip Code
43065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CARDINAL HEALTH, INC

Occupation (for Individual)
VP, Compensation.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 31 / 2020

Transaction ID : PR125270048344

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

C. Kirkland, Richard D, , ,

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 ▼

209.00

Date of Receipt

05 / 31 / 2020

Transaction ID : PR125270248344

Amount of Each Receipt this Period

57.00

☐ Memo Item

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

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

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

189.00