Edgar Filing: CARDINAL HEALTH INC - Form 4

CARDINAL	HEALTH INC	2										
Form 4												
August 06, 20	015											
FORM	4					** ^ *				OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this if no long	or								Expires:	January 31, 2005		
subject to STATEMENT OF CHAN				GES IN BENEFICIAL OW				NERSHIP OF	Estimated a			
Section 10	SECUR	SECURITIES				burden hours per						
Form 4 or Form 5									response	0.5		
obligation	¹⁸ Section 1						•	f 1935 or Section	n			
may conti <i>See</i> Instru 1(b).	nue.			vestment	. .							
(Print or Type R	esponses)											
MORRISON PATRICIA Symbo								5. Relationship of Reporting Person(s) to Issuer				
				INAL HEALTH INC [CAH]				(Check all applicable)				
(Month/Da				Date of Earliest Transaction Ionth/Day/Year) 8/04/2015				Director	100	0		
								Director 10% Owner X Officer (give title Other (specify below) Chief Information Officer				
(Street) 4. If Ame				ndment, Date Original				6. Individual or Joint/Group Filing(Check				
			nth/Day/Year)				Applicable Line)					
DUBLIN, O	H 43017							_X_ Form filed by 0 Form filed by M Person	One Reporting Pe Aore than One Re			
(City)	(State)	(Zip)	Tabl	a I - Non-D	arivativa S	ocurit	ies Aco	uired, Disposed of	f or Bonoficial	ly Owned		
1 77'41 - 6	от <i>с</i> г						-			-		
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	1			Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I)	Indirect Beneficial Ownership					
						(A) or		Following Reported Transaction(s)	(Instr. 4)	(Instr. 4)		
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Shares	08/04/2015			A <u>(1)</u>	11,693	А	\$0	42,490	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	Amou Under Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address			Relationships				
	Director	10% Owner	Officer	Other			
MORRISON PATRICIA 7000 CARDINAL PLACE DUBLIN, OH 43017			Chief Information Officer				
Signatures							
/s/ Elaine S. Natsis, Attorney-in-fact		08/06/2015					
**Signature of Reporting Person		Date					

Explanation of Responses:

- If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Reflects performance share units that will settle on August 15, 2015.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.