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LAWS STU	ART G										
Form 4	5 0011										
September 1	_										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB AF OMB Number:	3235-0287	
Check th			Expires:	January 31,							
if no long subject to Section 1 Form 4 o Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									2005 average rs per 0.5	
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940											
(Print or Type I	Responses)										
			2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer			
		CA	CARDINAL HEALTH INC [CAH]					(Check all applicable)			
(Last)	(First) (M		Date of Ear		insaction			Director	100	Owner	
(Month/l CARDINAL HEALTH, INC., 7000 09/14/2 CARDINAL PLACE				nth/Day/Year) 14/2011				Director 10% Owner X Officer (give title Other (specify below) below) SVP & Chief Accounting Officer			
	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person						
DUBLIN, OH 43017							Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I -	- Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		Co	3. 4. Securities Acquired Transactior(A) or Disposed of (D Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
			Co	ode V	Amount		Price \$	(Instr. 3 and 4)			
Common Shares	09/14/2011		S	(1)	1,191	D	41.14 (2)	8,039	D		
Common Shares	09/15/2011		F	<u>a(3)</u>	305	D	\$ 41.58 (4)	7,734	D		

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

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1

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 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Unde Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	s Relationships							
1	Director	10% Owner	Officer	Other				
LAWS STUART G CARDINAL HEALTH, INC. 7000 CARDINAL PLACE DUBLIN, OH 43017			SVP & Chief Accounting Officer					
Signatures								

/s/ Stuart G. 09/15/2011 Laws

<u>**</u>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) The sale reported on this Form 4 was effected pursuant to a 10b5-1 plan adopted by the reporting person on February 28, 2011.

(2) The price reported in column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$40.66 to \$41.61, inclusive. The reporting person undertakes to provide to Cardinal Health, Inc., any security holder of Cardinal Health, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in footnote (2) to this Form 4.

- (3) Represents withholding of shares to satisfy tax withholding obligations of the reporting person in connection with the vesting of 954 restricted shares.
- (4) Reflects closing price on prior business day.

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.