LAWS STUART G Form 4 August 17, 2010

# FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** 

**OMB** 3235-0287 Number: January 31,

Expires: 2005 Estimated average

0.5

burden hours per response...

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

See Instruction

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 may continue. 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1(b).

1. Name and Address of Reporting Person * LAWS STUART G			2. Issuer Name <b>and</b> Ticker or Trading Symbol CARDINAL HEALTH INC [CAH]					5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last) (First) (Middle)  CARDINAL HEALTH, INC., 7000  CARDINAL PLACE			3. Date of Earliest Transaction (Month/Day/Year) 08/15/2010					Director 10% Owner Sylvary Officer (give title Other (specify below) below)  SVP & Chief Accounting Officer			
	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 _ Form filed by More than One Reporting					
DUBLIN, C							Person				
(City)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	med on Date, if Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				5. Amount of Securities Beneficially Owned Following Reported	Indirect (I)		
				Codo V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Shares	08/15/2010			F(1)	123	D D	\$ 31.36 (2)	10,418	D		
Common Shares	08/15/2010			F(3)	326	D	\$ 31.36 (2)	10,092	D		
Common Shares (4)	08/16/2010			A	2,525	A	\$ 0	12,617	D		

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

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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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 30.94	08/16/2010		A	21,266	<u>(5)</u>	08/16/2017	Common Shares	21,266

## **Reporting Owners**

Reporting Owner Name / Address Relationships

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. 08/17/2010 Laws

\*\*Signature of Date
Reporting Person

## **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) Represents withholding of shares to satisfy tax withholding obligations of the reporting person in connection with the vesting of 382 restricted shares.
- (2) Reflects closing price on prior business day.
- (3) Represents withholding of shares to satisfy tax withholding obligations of the reporting person in connection with the vesting of 1,018 restricted shares.
- (4) Grant of restricted share units that vest in three equal annual installments beginning on August 16, 2011.

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(5) The stock option vests in three equal annual installments beginning on August 16, 2011.

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.