Edgar Filing: CARDINAL HEALTH INC - Form 4

CARDINAL	HEALTH IN	С								
Form 4										
May 12, 2006										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							т	PPROVAL		
	- UNITE	D STATES					COMMISSION	OND	3235-0287	
Check this	s box		vv as	hington,	D.C. 205	49		Number:	January 31,	
if no longer STATEMENT OF CHANCES IN BEI					ENEFICIAL OWNERSHIP OF			Expires:	2005	
subject to Section 16	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated a			
Form 4 or							burden hou response	•		
Form 5	Filed 1	pursuant to S	Section 16	6(a) of the	Securiti	es Exchang	ge Act of 1934,			
obligation may conti		17(a) of the	Public Ut	ility Holdi	ing Com	pany Act c	of 1935 or Sectio	n		
<i>See</i> Instru 1(b).		30(h)	of the Inv	vestment (Company	Act of 19	40			
(Print or Type R	esponses)									
1. Name and Address of Reporting Person <u>*</u> DARDEN CALVIN			2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer				
			CARDINAL HEALTH INC [CAH]				(Check all applicable)			
(Last) (First) (Middle)			3. Date of Earliest Transaction							
11235 STROUP RD. (Street)			(Month/Day/Year) 05/10/2006			X_ Director Officer (give		b Owner er (specify		
			03/10/2006				below) below)			
			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			
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecurities Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of	2. Transaction	Date 2A Dee		3.	4. Securit		5. Amount of	6. Ownership	-	
Security (Instr. 3)	(Month/Day/Year) Execut any		Day/Year)		Disposed of (D) (Instr. 3, 4 and 5)		Securities Beneficially Owned	Form: Direct (D) or Indirect (I)	Indirect Beneficial Ownership	
							Following Reported	(Instr. 4)	(Instr. 4)	
						(A) or	Transaction(s)			
				Code V	Amount	(D) Price	(Instr. 3 and 4)			
Common Shares							485	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number onof Derivative 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)		8. F Den Sec (Ins
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option (right to buy) <u>(1)</u>	\$ 61.79					11/02/2006	11/02/2012	Common Shares	3,398	
Phantom Stock (2)	<u>(3)</u>	05/10/2006		А	260	(3)	(3)	Common Shares	260	\$

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Reporting Owners

Reporting Owner Name / Addre	255	Relationships						
	Director	10% Owner	Officer	Other				
DARDEN CALVIN 11235 STROUP RD. ROSWELL, GA 30075	X							
Signatures								
Calvin Darden	05/10/2006							
<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) Stock option granted pursuant to the Cardinal Health, Inc. Equity Incentive Plan.
- (2) Phantom stock held under the Company's Deferred Compensation Plan.
- (3) Each share of phantom stock is the economic equivalent of one common share. The shares of phantom stock become payable, in cash or common shares, at the election of the reporting person, at least six months after termination from board service.

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.