

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

UnitedHealth Group Incorporated PAC (United for Health)

ADDRESS (number and street)

9900 Bren Road East

Check if different
than previously
reported. (ACC)

Minnetonka

MN

55343

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00274431

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☒ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
02 01 2013

through

M M M / D D D / Y Y Y Y Y Y
02 28 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Sherwood, Susan, , ,

Signature of Treasurer

Sherwood, Susan, , ,

Date

M M M / D D D / Y Y Y Y Y Y
03 20 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period: From: MM / DD / YYYY 02 / 01 / 2013 To: MM / DD / YYYY 02 / 28 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, YYYY 2013		220131.42
(b) Cash on Hand at Beginning of Reporting Period.....	263153.04	
(c) Total Receipts (from Line 19)	71331.25	119352.87
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	334484.29	339484.29
7. Total Disbursements (from Line 31)	0.00	5000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	334484.29	334484.29
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	3

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	44533.70	60177.76
(ii) Unitemized	26797.55	59175.11
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	71331.25	119352.87
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	71331.25	119352.87
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	71331.25	119352.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	71331.25	119352.87

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	5000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	5000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	71331.25	119352.87
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	71331.25	119352.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. COOK, WAYNE F, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1159812829801

Amount of Each Receipt this Period

180.00

☐ Memo Item

P/R Deduction (\$60.00 Bi-Weekly)

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

B. WICHMANN, DAVID S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
EVP Pres UHG Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.50

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1159814729801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

C. ERLANDSON, PATRICK J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Bus Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

961.50

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1159815929801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

1333.80

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

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

FOR LINE NUMBER: PAGE 7 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. SAURO, PATRICIA R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP UnitedHlthcare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1159816429801

Amount of Each Receipt this Period

180.00

☐ Memo Item

P/R Deduction (\$60.00 Bi-Weekly)

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

B. MUNSELL, WILLIAM A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
EVP UnitedHlth Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1159816629801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

C. PENSHORN, JOHN S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP UnitedHlth Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

961.50

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1159816929801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

1056.90

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

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

FOR LINE NUMBER: PAGE 8 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. KALLMEYER, PAUL D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1159817429801

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

B. RYAN, TIMOTHY F, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1159817929801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

C. QUIRK, THOMAS J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1159819129801

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

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

591.00

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

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

FOR LINE NUMBER: PAGE 9 OF 49

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. TUCKSON, REED V, , M.D.

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
EVP Consumr Hlth Med Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.90

Date of Receipt

02 / 28 / 2013

Transaction ID : PR1159819829801

Amount of Each Receipt this Period

346.14

☐ Memo Item

P/R Deduction (\$115.38 Bi-Weekly)

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

B. TRACY, WILLIAM C, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.50

Date of Receipt

02 / 28 / 2013

Transaction ID : PR1159821529801

Amount of Each Receipt this Period

173.10

☐ Memo Item

P/R Deduction (\$57.70 Bi-Weekly)

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

C. MIGLIORI, RICHARD J, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Bus Initi Clin Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR1159827429801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

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

819.24

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

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

FOR LINE NUMBER: PAGE 10 OF 49
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. RIVET, JEANNINE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
EVP UnitedHlth Grp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.50

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1159830029801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

B. WINTERS, JILL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1159840429801

Amount of Each Receipt this Period

162.00

☐ Memo Item

P/R Deduction (\$54.00 Bi-Weekly)

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

C. WELTERS, ANTHONY, , Mr.,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
EVP UnitedHlth Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

961.50

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1332013229801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

1315.80

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

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

FOR LINE NUMBER: PAGE 11 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. VALERIUS, THOMAS J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Recruiting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1551161329801

Amount of Each Receipt this Period

230.76

☐ Memo Item

P/R Deduction (\$76.92 Bi-Weekly)

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

B. WEIHRAUCH, LOIS T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1551161429801

Amount of Each Receipt this Period

180.00

☐ Memo Item

P/R Deduction (\$60.00 Bi-Weekly)

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

C. ENDERLE, JOHN O, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn Exec Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1554323529801

Amount of Each Receipt this Period

165.00

☐ Memo Item

P/R Deduction (\$55.00 Bi-Weekly)

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

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

575.76

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

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

FOR LINE NUMBER: PAGE 12 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. JELINEK, RICK M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

02 / 28 / 2013

Transaction ID : PR1554323929801

Amount of Each Receipt this Period

384.60

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

B. RADU, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
COO Collaborative Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR1554324529801

Amount of Each Receipt this Period

162.00

☐ Memo Item

P/R Deduction (\$54.00 Bi-Weekly)

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

C. ERICKSON, KAREN L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Optum Exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

961.50

Date of Receipt

02 / 28 / 2013

Transaction ID : PR1575957629801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

1123.50

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

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

FOR LINE NUMBER: PAGE 13 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MONFILETTO, ERNEST, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Plan Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1575958129801

Amount of Each Receipt this Period

230.76

☐ Memo Item

P/R Deduction (\$76.92 Bi-Weekly)

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

B. VALENTA, LEE D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Pres Lif Scis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.50

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1575958529801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

C. PAUL, THOMAS S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
UHC Chief Cnsmr Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1580864729801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

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

1107.66

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

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

FOR LINE NUMBER: PAGE 14 OF 49
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. WEBB, ROBERT THOMAS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP UNITEDHLTH GRP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.50

Date of Receipt

02 / 28 / 2013

Transaction ID : PR1580865329801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

B. HUGHES, RICHARD J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Human Capital Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR1596304129801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

C. JOHNSON, THAD C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Mkt Group Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR1596304329801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

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

1176.90

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

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

FOR LINE NUMBER: PAGE 15 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MASSEY, GAYE ADAMS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Sr Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.90

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1596304529801

Amount of Each Receipt this Period

346.14

☐ Memo Item

P/R Deduction (\$115.38 Bi-Weekly)

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

B. SCHUMACHER, DANIEL J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Mkt Group CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1596305429801

Amount of Each Receipt this Period

345.00

☐ Memo Item

P/R Deduction (\$115.00 Bi-Weekly)

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

C. OBERRENDER, ROBERT W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1596307029801

Amount of Each Receipt this Period

330.00

☐ Memo Item

P/R Deduction (\$110.00 Bi-Weekly)

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

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

1021.14

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

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

FOR LINE NUMBER: PAGE 16 OF 49

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. RUTH, KEVIN J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Entrprs Clin Alignm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1596317429801

Amount of Each Receipt this Period

225.00

☐ Memo Item

P/R Deduction (\$75.00 Bi-Weekly)

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

B. MICHAUX, MICHAEL D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP GM PCM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1600598529801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

C. SANDY, LEWIS G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Clin Advancement

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1600598729801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

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

825.00

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

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

FOR LINE NUMBER: PAGE 17 OF 49

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. PETERSON, MATTHEW W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR1602669929801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

B. MALONEY, JEFFREY W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.75

Date of Receipt

02 / 28 / 2013

Transaction ID : PR1613243529801

Amount of Each Receipt this Period

288.45

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

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

C. KOOREN, STEVE R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

961.50

Date of Receipt

02 / 28 / 2013

Transaction ID : PR1653443229801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

1165.35

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

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

FOR LINE NUMBER: PAGE 18 OF 49
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. BELLAMY, THOMAS J, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SB RVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.50

Date of Receipt

02 / 28 / 2013

Transaction ID : PR1653444329801

Amount of Each Receipt this Period

173.10

☐ Memo Item

P/R Deduction (\$57.70 Bi-Weekly)

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

B. JACQUES, ALISTAIR D, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.50

Date of Receipt

02 / 28 / 2013

Transaction ID : PR1653445229801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

C. SNOWDEN, MILES S, , Mr.,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Chief Med Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

961.50

Date of Receipt

02 / 28 / 2013

Transaction ID : PR1746717829801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

1326.90

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

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

FOR LINE NUMBER: PAGE 19 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. ANDERSON, CATHERINE K, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.50

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1903550729801

Amount of Each Receipt this Period

173.10

☐ Memo Item

P/R Deduction (\$57.70 Bi-Weekly)

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

B. EDBERG, SUSAN B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1903578129801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

C. SANTELLI, JOHN C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR1903622029801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

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

773.10

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

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

FOR LINE NUMBER: PAGE 20 OF 49
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. BERKEL, SUSAN LYNN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2119468129801

Amount of Each Receipt this Period

576.00

☐ Memo Item

P/R Deduction (\$192.00 Bi-Weekly)

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

B. CARTER, LESLIE J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Ntwk Contrctng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2119470329801

Amount of Each Receipt this Period

288.00

☐ Memo Item

P/R Deduction (\$96.00 Bi-Weekly)

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

C. HANSEN, DAVID M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

675.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2119476729801

Amount of Each Receipt this Period

405.00

☐ Memo Item

P/R Deduction (\$135.00 Bi-Weekly)

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

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

1269.00

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

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

FOR LINE NUMBER: PAGE 21 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. HO, SAMUEL W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Mkt Grp Chief Clin Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2119477929801

Amount of Each Receipt this Period

461.40

☐ Memo Item

P/R Deduction (\$153.80 Bi-Weekly)

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

B. JONES, JOHN D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2119479229801

Amount of Each Receipt this Period

288.00

☐ Memo Item

P/R Deduction (\$96.00 Bi-Weekly)

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

C. PITTMAN, AUSTIN T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Pres Ntwks

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

675.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2119486729801

Amount of Each Receipt this Period

405.00

☐ Memo Item

P/R Deduction (\$135.00 Bi-Weekly)

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

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

1154.40

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

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

FOR LINE NUMBER: PAGE 22 OF 49
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. POLICH, CYNTHIA L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
M R Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2119486829801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

B. TUCKER, STEVEN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Regl Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2119492029801

Amount of Each Receipt this Period

288.00

☐ Memo Item

P/R Deduction (\$96.00 Bi-Weekly)

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

C. BURKE, FORREST G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Pres PS Labor Trust

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2133132429801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

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

888.00

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

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

FOR LINE NUMBER: PAGE 23 OF 49
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MORISATO, SUSAN C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Pres Insurance Sols

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

965.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2133133829801

Amount of Each Receipt this Period

579.00

☐ Memo Item

P/R Deduction (\$193.00 Bi-Weekly)

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

B. PUTNAM, T JEFFREY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Financial Plng Anlys

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.50

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2133134229801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

C. SMITH, DANNETTE L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Sr Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

965.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2145729929801

Amount of Each Receipt this Period

579.00

☐ Memo Item

P/R Deduction (\$193.00 Bi-Weekly)

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

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

1734.90

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

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

FOR LINE NUMBER: PAGE 24 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. WEAR, MARGARET W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2145730229801

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

B. SPIVACK, DAVID A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Bus Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.50

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2162867629801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

C. GIBSON, CHRISTINE W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Strat Initi

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

576.90

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2225166729801

Amount of Each Receipt this Period

346.14

☐ Memo Item

P/R Deduction (\$115.38 Bi-Weekly)

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

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

1073.04

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

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

FOR LINE NUMBER: PAGE 25 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. SLAVITT, ANDREW M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Optum Exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2225167429801

Amount of Each Receipt this Period

750.00

☐ Memo Item

P/R Deduction (\$250.00 Bi-Weekly)

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

B. BEAULE, JEAN-FRANCOIS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.50

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2225813629801

Amount of Each Receipt this Period

173.10

☐ Memo Item

P/R Deduction (\$57.70 Bi-Weekly)

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

C. RANGEN, ERIC S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Chief Accting Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

961.50

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2225819329801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 26 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. SAILOR, ROY THOMAS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Clnt Svc Acct Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2225819729801

Amount of Each Receipt this Period

230.76

☐ Memo Item

P/R Deduction (\$76.92 Bi-Weekly)

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

B. RICHEY, DARRELL S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Golden Rule Financial Corp.

Occupation (for Individual)
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2231352329801

Amount of Each Receipt this Period

240.00

☐ Memo Item

P/R Deduction (\$80.00 Bi-Weekly)

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

C. CONNLY, MICHAEL R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Chief Tech Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2247625829801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

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

770.76

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

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

FOR LINE NUMBER: PAGE 27 OF 49
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. CARCIONE JR, JOSEPH R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.50

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2247626829801

Amount of Each Receipt this Period

173.10

☐ Memo Item

P/R Deduction (\$57.70 Bi-Weekly)

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

B. O'BRIEN, DENNIS P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
REGN PRES NTKW MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.50

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2247627329801

Amount of Each Receipt this Period

173.10

☐ Memo Item

P/R Deduction (\$57.70 Bi-Weekly)

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

C. VERNEY, JEFFERY RICHARD, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

288.50

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2247627429801

Amount of Each Receipt this Period

173.10

☐ Memo Item

P/R Deduction (\$57.70 Bi-Weekly)

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

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

519.30

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

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

FOR LINE NUMBER: PAGE 28 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. BROOKS, DARRELL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Info Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.50

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2247627629801

Amount of Each Receipt this Period

173.10

☐ Memo Item

P/R Deduction (\$57.70 Bi-Weekly)

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

B. PRINCE, JOHN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Mkt Group CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2259738429801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

C. STEVENS, SIMON L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
EVP UnitedHlth Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

543.50

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2364863229801

Amount of Each Receipt this Period

326.10

☐ Memo Item

P/R Deduction (\$108.70 Bi-Weekly)

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

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

790.20

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

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

FOR LINE NUMBER: PAGE 29 OF 49
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. DE SA, JEANNE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Rsch

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2402315929801

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

B. SOUZA, DIANE D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
CEO Spclty Bens

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2402320029801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

C. LILIENTHAL, LORI SWEERE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
EVP Human Capital

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

965.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2402320229801

Amount of Each Receipt this Period

579.00

☐ Memo Item

P/R Deduction (\$193.00 Bi-Weekly)

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

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

1305.90

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

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

FOR LINE NUMBER: PAGE 30 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. CRANLEY, SHELLEY WIKE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Regl Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR240244429801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

B. BECKER, JAMES H, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.25

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2402445129801

Amount of Each Receipt this Period

461.55

☐ Memo Item

P/R Deduction (\$153.85 Bi-Weekly)

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

C. COLEMAN, JAMES C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Empl Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2402445229801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

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

1061.55

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

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

FOR LINE NUMBER: PAGE 31 OF 49
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. DONOVAN, JAMES D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Bus Dev Mktg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2402445329801

Amount of Each Receipt this Period

195.00

☐ Memo Item

P/R Deduction (\$65.00 Bi-Weekly)

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

B. LARSEN, JOHN L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

965.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2402445629801

Amount of Each Receipt this Period

579.00

☐ Memo Item

P/R Deduction (\$193.00 Bi-Weekly)

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

C. JINDAL, SOHINI G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Govt Rel Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2402446329801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

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

1074.00

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

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

FOR LINE NUMBER: PAGE 32 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. PETRELLA, RUSSELL C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Pres C S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2402446429801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

B. ALEXANDER, CORY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gov't Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.50

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2405428829801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

C. WALSH, PETER H, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Sr Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

485.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2405431129801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

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

1167.90

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

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

FOR LINE NUMBER: PAGE 33 OF 49
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. KOZIARA BOUDREAUX, GAIL, KOZIARA, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
EVP Gr Pres UHC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.55

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2437119529801

Amount of Each Receipt this Period

576.93

☐ Memo Item

P/R Deduction (\$192.31 Bi-Weekly)

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

B. LIVINGSTON, DAVID K, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Plan Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2437120229801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

C. BALTHAZOR, PAUL JOSEPH, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2437120729801

Amount of Each Receipt this Period

180.00

☐ Memo Item

P/R Deduction (\$60.00 Bi-Weekly)

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

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

1047.93

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. RAINEY, PETER W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2437127529801

Amount of Each Receipt this Period

345.00

☐ Memo Item

P/R Deduction (\$115.00 Bi-Weekly)

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

B. LIPPERT, ROBIN E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.55

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2439928029801

Amount of Each Receipt this Period

576.93

☐ Memo Item

P/R Deduction (\$192.31 Bi-Weekly)

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

C. HEYMAN, STEPHEN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2444265729801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

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

1221.93

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MCDUGAL, LORI C, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
CEO UMVS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.50

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2445015329801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

B. KEITEL, KARIN, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2460167629801

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

C. SOLOMON, SHELBY P, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Pres Govt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2460167929801

Amount of Each Receipt this Period

230.00

☐ Memo Item

P/R Deduction (\$115.00 Bi-Weekly)

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

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

956.90

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. RENFRO, LARRY C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
EVP UHG CEO Optum

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.50

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2460168129801

Amount of Each Receipt this Period

576.90

☐ Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

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

B. SCHICK, SUE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2480620529801

Amount of Each Receipt this Period

375.00

☐ Memo Item

P/R Deduction (\$125.00 Bi-Weekly)

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

C. KUBICKI, JERI G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2486697829801

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

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

1101.90

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

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

FOR LINE NUMBER: PAGE 37 OF 49

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MCMAHON, DIRK C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2491457029801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

B. SULLIVAN, KATHRYN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2491457529801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

C. SMITH, KARA V, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

769.25

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2540175329801

Amount of Each Receipt this Period

461.55

☐ Memo Item

P/R Deduction (\$153.85 Bi-Weekly)

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

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

1052.55

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

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

FOR LINE NUMBER: PAGE 38 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. EDWARDS, HYLLIUS R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2541300429801

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

B. VERSAGGI, JOHN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.80

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2541300829801

Amount of Each Receipt this Period

288.48

☐ Memo Item

P/R Deduction (\$96.16 Bi-Weekly)

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

C. DOHERTY, JOHN F, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2542024529801

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

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

588.48

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

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

FOR LINE NUMBER: PAGE 39 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. RAMSAY, RICHARD E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Govt Rel Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR254254229801

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

B. THOMAS, RICHARD D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2553475429801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

C. VOJTA, DENEEN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Bus Initi Clin Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

965.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2553475529801

Amount of Each Receipt this Period

579.00

☐ Memo Item

P/R Deduction (\$193.00 Bi-Weekly)

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

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

1020.00

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

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

FOR LINE NUMBER: PAGE 40 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. FLAGSTAD, KARSTEN S, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Info Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2554013029801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

B. CLUTE, DANIEL J, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2560064429801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

C. GIANCURSIO, DONALD J, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Plan of Nevada

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

965.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2560064929801

Amount of Each Receipt this Period

579.00

☐ Memo Item

P/R Deduction (\$193.00 Bi-Weekly)

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

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

1170.00

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

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

FOR LINE NUMBER: PAGE 41 OF 49
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. LIPPMAN, SHELDON, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2560065429801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

B. LOBERG, ANGELA L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SB VP SIs Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2560065529801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

C. LUCHT, JEFFREY D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Act Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2560065629801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

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

873.00

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

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

FOR LINE NUMBER: PAGE 42 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. CRAMPTON, KATHLEEN R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Plan Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR256321129801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

B. WALSH, JENNIFER F, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2564296829801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

C. MILLER, ARTHUR R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

833.35

Date of Receipt

02 / 28 / 2013

Transaction ID : PR2564296929801

Amount of Each Receipt this Period

500.01

☐ Memo Item

P/R Deduction (\$166.67 Bi-Weekly)

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

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

1091.01

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

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

FOR LINE NUMBER: PAGE 43 OF 49
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MACKENZIE, ANDREW C., ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2564297129801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

B. HANSEN, PAUL DANIEL, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Controller Mkt Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2564802729801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

C. MORAN, ELIZABETH D, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Chief Complnc/Ethics Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2564803129801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

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

882.00

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

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

FOR LINE NUMBER: PAGE 44 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MCENERY, WILLIAM T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2564803629801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

B. BERNS, DEBRA J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Sr Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2564804029801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

C. RUBIN, KATHRYN S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Social Resp/Pres Found

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2564804329801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

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

882.00

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

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

FOR LINE NUMBER: PAGE 45 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. ARNONE, WENDY D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2568900529801

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

B. WIFFLER, THOMAS P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2572992729801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

C. MESSAL, ANITA Q, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2573877029801

Amount of Each Receipt this Period

375.00

☐ Memo Item

P/R Deduction (\$125.00 Bi-Weekly)

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

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

816.00

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

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

FOR LINE NUMBER: PAGE 46 OF 49

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. VAN HOLMES, LORI A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Human Capital Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2575030929801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

B. CASSANO, SCOTT G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Plan of Nevada

Occupation (for Individual)
Dir Prov Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2575164429801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

C. WALSH, DAVID W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Regl Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2575312729801

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

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

741.00

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

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

FOR LINE NUMBER: PAGE 47 OF 49
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. LOSE, JERI L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Info Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2575419829801

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

B. HEBERT, PAUL B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
CEO Spclty Bens Dntl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2575522329801

Amount of Each Receipt this Period

375.00

☐ Memo Item

P/R Deduction (\$125.00 Bi-Weekly)

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

C. CLARK, TERRENCE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2575636929801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

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

966.00

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

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

FOR LINE NUMBER: PAGE 48 OF 49
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. SUBLETTE, NANCY J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
PS Dir Strat Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2575646929801

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

B. LANGAN, PATRICK J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2575885029801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

C. JOHNSON, RESTOR, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Entrprs Real Estate Svs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2576051629801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

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

732.00

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

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

FOR LINE NUMBER: PAGE 49 OF 49
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. REX, JOHN F, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Mkt Group CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

965.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2576060029801

Amount of Each Receipt this Period

579.00

☐ Memo Item

P/R Deduction (\$193.00 Bi-Weekly)

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

B. KENIRY, DANIEL J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gov't Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2013

Transaction ID : PR2577379329801

Amount of Each Receipt this Period

291.00

☐ Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

☐ Memo Item

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

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

870.00

44533.70