



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2023"/>	<input type="text" value="422616.69"/>	<input type="text" value="422616.69"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="693255.26"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="127298.36"/>	<input type="text" value="1359091.57"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="820553.62"/>	<input type="text" value="1781708.26"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="99950.00"/>	<input type="text" value="1061104.64"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="720603.62"/>	<input type="text" value="720603.62"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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](http://www.fec.gov)**

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Report Covering the Period: From:  /  /  To:  /  /

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).....	126512.45	1272292.40
(ii) Unitemized .....	785.91	84299.17
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	127298.36	1356591.57
(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) .....	127298.36	1356591.57
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	2500.00
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)).....▶	127298.36	1359091.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	127298.36	1359091.57

**DETAILED SUMMARY PAGE**

of Disbursements

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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.....	49500.00	555500.00
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	105.00
(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	105.00
29. Other Disbursements (Including Non-Federal Donations).....	50450.00	505499.64
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)) ..	99950.00	1061104.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	99950.00	1061104.64

**DETAILED SUMMARY PAGE**  
of Disbursements

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<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	127298.36	1356591.57
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	105.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	127298.36	1356486.57
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: (check only one)	PAGE 6 OF 222
	<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 (UnitedHealth Group PAC)**

**A. STILLMAN, CRAIG, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15705 51ST PLACE NORTH  
 City PLYMOUTH State MN Zip Code 55446-4517  
 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 ▼ 5000.00

Date of Receipt 10 / 03 / 2023  
**Transaction ID : 49147428**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. PROKOCKI, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 821 HIBISCUS CT  
 City CORONA DEL MAR State CA Zip Code 92625-1548  
 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 ▼ 4038.30

Date of Receipt 10 / 04 / 2023  
**Transaction ID : 49401614**  
 Amount of Each Receipt this Period 192.30  
 Memo Item

**C. STREB, DEBORAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2201 NORTH STAR ROAD  
 City UPPER ARLINGTON State OH Zip Code 43221-3810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Dir Capability  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1159794169411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5220.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 222
	<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 (UnitedHealth Group PAC)**

**A. ELLISTON, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 302 S 52ND ST  
 City OMAHA State NE Zip Code 68132-3544  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Fin  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1159805969411**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 P/R Deduction (\$10.00 Bi-Weekly)

**B. FALK, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 323 LAWRENCE AVE  
 City HIGHLAND PARK State NJ Zip Code 08904-1851  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Med Dir  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1159820269411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**C. MIGLIORI, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8025 VIA VECCHIA  
 City NAPLES State FL Zip Code 34108-7700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) EVP, Senior Advisor  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1159827469411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	432.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 222
	<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 (UnitedHealth Group PAC)**

**A. HOCK, CHRISTOPHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 215 WINDMILL HILL  
 City WETHERSFIELD State CT Zip Code 06109-2746  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 253.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1551128969411**  
 Amount of Each Receipt this Period 23.08  
 Memo Item  
 P/R Deduction (\$11.54 Bi-Weekly)

**B. MILLER, KATHERINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2321 HARBOR LAKE DRIVE  
 City ORANGE PARK State FL Zip Code 32003-7799  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Pres Ntwk  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1554324369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. ANDERSON, CRAIG, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 47 AMATO CIRCLE  
 City WETHERSFIELD State CT Zip Code 06109-3971  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Regn Pres Ntwk Mgmt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1575957369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	792.28
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 222
	<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 (UnitedHealth Group PAC)**

**A. KELLY, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4901 HAWTHORNE COURT  
 SUITE 304  
 City EDINA State MN Zip Code 55436-5802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Tax  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1575959769411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. JOHNSON, THAD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9741 GLACIER BAY  
 City EDEN PRAIRIE State MN Zip Code 55347-2615  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1596304369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. SCHUMACHER, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5401 LARADA LANE  
 City EDINA State MN Zip Code 55436-1024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Chief Strat & Growth Officer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1596305469411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 1153.80  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. THEISEN, SCOTT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1950 MEADOWWOODS TRAIL  
 City LONG LAKE State MN Zip Code 55356-9312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Unit CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1596305669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. ANDERSON, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17907 INVERNESS CURVE  
 City EDEN PRAIRIE State MN Zip Code 55347-2155  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Clnt Relationship  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1596309369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. BORCA, TROY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2112 STROLLING WAY  
 City NORTHLAKE State TX Zip Code 76226-3369  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1596310469411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	846.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. BRODIGAN, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2159 BRINKER ST  
 City CHANHASSEN State MN Zip Code 55317-9361  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Underwriting  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.66

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1596310669411**  
 Amount of Each Receipt this Period 28.06  
 Memo Item  
 P/R Deduction (\$14.03 Bi-Weekly)

**B. DAVIDSON, TRACY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6058 HARBOUR TOWN CIR  
 City WESTERVILLE State OH Zip Code 43082-8144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1596311669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. HIGGINS, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 54 BELCREST ROAD  
 City WEST HARTFORD State CT Zip Code 06107-3304  
 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 ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1596313869411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	489.58
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 222
	<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 (UnitedHealth Group PAC)**

**A. TODD, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 467 PRAIRIE WAY SOUTH  
 City BAYPORT State MN Zip Code 55003-1607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Underwriting  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1596319069411**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 P/R Deduction (\$25.00 Bi-Weekly)

**B. PETERSON, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2260 FOX STREET  
 City ORONO State MN Zip Code 55356-8316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) CEO Ancillary & Ind/Sgt CAO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1602669969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. SEVIGNY, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 137 CREEKVIEW LANE  
 City LORETTO State MN Zip Code 55357-2111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Director Technology  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1653445769411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	462.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. ARCHER, LORI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2781 SADDLE CLUB ROAD  
 City GREENWOOD State IN Zip Code 46143-9211  
 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 ▼ 253.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR1806750169411**  
 Amount of Each Receipt this Period 23.08  
 Memo Item  
 P/R Deduction (\$11.54 Bi-Weekly)

**B. EMERSON, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18855 MEADOW VIEW BLVD  
 City PRIOR LAKE State MN Zip Code 55372-3133  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Unit CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR1806750369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. ULLOA, SHAUNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 STRATFORD ROAD  
 City FARMINGTON State CT Zip Code 06032-1444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) NA VP Clnt Relationship  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR1832379169411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	435.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. ANDERSON, CATHERINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 57 SIMMONS LANE  
 City SEVERNA PARK State MD Zip Code 21146-1921  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Health Equity Strategy  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1903550769411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. WEYMOUTH, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1185 HOPKINTON RD  
 City HOPKINTON State NH Zip Code 03229-2647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Mkt Grp CIO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR1903636969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. BEATY, JON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32860 SE DIVERS RD  
 City ESTACADA State OR Zip Code 97023-7507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Clin Qlty  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2119467869411**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 P/R Deduction (\$10.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	789.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 (UnitedHealth Group PAC)**

**A. CAMPBELL, COLLEEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15000 CAST PEBBLE CIR  
 City PARKER State CO Zip Code 80134-4195  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Reg Adhr Sr Cnslt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2119469969411**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 P/R Deduction (\$15.00 Bi-Weekly)

**B. DEMBROSKI, TODD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1390 FINCH LN  
 City GREEN BAY State WI Zip Code 54313-6400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Act Svs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2119472869411**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 P/R Deduction (\$15.00 Bi-Weekly)

**C. DUNGAN, TARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 619 HIGH COUNTRY RIDGE  
 City SAN ANTONIO State TX Zip Code 78260-1829  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Assc Dir, Clin Appeals  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2119473269411**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 P/R Deduction (\$10.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	80.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. GILDERNICK, AMY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2709 WILLIAMS GRANT  
 City DE PERE State WI Zip Code 54115-9456  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2119475269411**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 P/R Deduction (\$20.00 Bi-Weekly)

**B. HAYES, PAULINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21851 NEWLAND ST SPACE 117  
 City HUNTINGTON BEACH State CA Zip Code 92646-7629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Fin  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2119477469411**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 P/R Deduction (\$10.00 Bi-Weekly)

**C. KANNE, KATHLEEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4826 PALOMINO COURT  
 City ERIE State PA Zip Code 16506-6624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Comm  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2119479669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	444.60
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. MACEMEADOR, HEATHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13531 CARLTON OAKS  
 City SAN ANTONIO State TX Zip Code 78232-4902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Med Clin Ops  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2119482569411**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 P/R Deduction (\$20.00 Bi-Weekly)

**B. MURRAY, CAROLYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 834 WOODTACK COVE WAY  
 City HENDERSON State NV Zip Code 89002-8294  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Health Plan of Nevada Occupation (for Individual) SB VP SIs Acct Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2119484869411**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 P/R Deduction (\$10.00 Bi-Weekly)

**C. NYGARD, KEITH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8056 CARPENTER CREEK AVENUE  
 City LAS VEGAS State NV Zip Code 89113-3685  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Reg Adhr  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2119485069411**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 P/R Deduction (\$20.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. OLLMANNWAGNER, TRACY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 TIMBER LANE  
 City GREEN BAY State WI Zip Code 54313-5841  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Assc Dir Sls Ops  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2119485269411**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 P/R Deduction (\$15.00 Bi-Weekly)

**B. SING, MARTIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9407 LLANO VERDE  
 City HELOTES State TX Zip Code 78023-4156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Cust Service  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2119490169411**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 P/R Deduction (\$10.00 Bi-Weekly)

**C. STETTLER, RONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11527 TRAILS END RD  
 City LEANDER State TX Zip Code 78641-5813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Hlthcare Econ  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2119490469411**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 P/R Deduction (\$10.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. WRIGHT, GREGORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10471 STRAND TERRACE  
 City SANTA ANA State CA Zip Code 92705-1495  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2119494169411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. YOUNG, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 36296 N 98TH WAY  
 City SCOTTSDALE State AZ Zip Code 85262-3138  
 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 ▼ 330.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2119494469411**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 P/R Deduction (\$15.00 Bi-Weekly)

**C. CUMMINGS, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1929 FAIRMOUNT AVE  
 City SAINT PAUL State MN Zip Code 55105-1539  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Finance Leader  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2133132669411**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 P/R Deduction (\$15.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	444.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. HULTGREN, BROR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 408 22ND ST  
 City GOLDEN State CO Zip Code 80401-2452  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2133133269411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. COLE, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9790 FOXWORTH DRIVE  
 City JOHNS CREEK State GA Zip Code 30022-6259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Local Markets VP Brkr Svs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2145728369411**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 P/R Deduction (\$10.00 Bi-Weekly)

**C. LEWIS, KURT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 961 RIVER FOREST DRIVE  
 City MAINEVILLE State OH Zip Code 45039-7720  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2203967569411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	789.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 222
	<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 (UnitedHealth Group PAC)**

**A. BEAULE, JEAN-FRANCOIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 STRATFORD RD  
 City FARMINGTON State CT Zip Code 06032-1444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Hlth Advancement  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4210.38

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2225813669411**  
 Amount of Each Receipt this Period 390.00  
 Memo Item  
 P/R Deduction (\$195.00 Bi-Weekly)

**B. KANTOLA, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7031 HALSTEAD DRIVE  
 City MINNETRISTA State MN Zip Code 55364-3201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP IT  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2247627069411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. OBRIEN, DENNIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 61 LOUGHLIN AVE  
 City COS COB State CT Zip Code 06807-2621  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2247627369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1159.20
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. CRONN, CHRISTOPHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1122 COLORADO STREET  
SUITE 2399

City AUSTIN State TX Zip Code 78701-2132

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Govt Affs Dir

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1269.18

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2270522969411**

Amount of Each Receipt this Period 115.38

Memo Item

P/R Deduction (\$57.69 Bi-Weekly)

**B. FRASCINO, MJ, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4575 SOUTH ATLANTIC AVENUE  
# 6311

City PONCE INLET State FL Zip Code 32127-7096

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Mktg Comm

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2402316569411**

Amount of Each Receipt this Period 28.00

Memo Item

P/R Deduction (\$14.00 Bi-Weekly)

**C. JACOBS, DONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19495 VINE RIDGE ROAD

City EXCELSIOR State MN Zip Code 55331-9173

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Proj Mgr II

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2402317369411**

Amount of Each Receipt this Period 20.00

Memo Item

P/R Deduction (\$10.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	163.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. KEPLEYCARRIER, ANGELA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3219 PENINSULA DRIVE  
 City JAMESTOWN State NC Zip Code 27282-8717  
 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 ▼ 440.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2402317769411**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 P/R Deduction (\$20.00 Bi-Weekly)

**B. MCGRATH, STACY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5801 CHOWEN AVE S  
 City EDINA State MN Zip Code 55410-2759  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Bus Process  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2402318569411**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 P/R Deduction (\$20.00 Bi-Weekly)

**C. MORRISONDAVIS, ANDREA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 LAKESHIRE COURT  
 City OWINGS MILLS State MD Zip Code 21117-1246  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Acct Mgt Cons Clnt Svc  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2402318969411**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 P/R Deduction (\$10.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 222
	<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 (UnitedHealth Group PAC)**

**A. ROSSI, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 510 BUFFALO TOM DRIVE  
 City GREENSBORO State NC Zip Code 27455-8344  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Exec Dir  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2402319669411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. HIGA, JOY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2208 ELM AVENUE  
 City MANHATTAN BEACH State CA Zip Code 90266-2809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Chief Compl Off & SVP Reg Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2402446269411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. ALEXANDER, CORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6412 HIGHLAND DRIVE  
 City CHEVY CHASE State MD Zip Code 20815-6608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) EVP, Senior Advisor  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2405428869411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	797.28
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 222
	<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 (UnitedHealth Group PAC)**

**A. WEE, KATHLYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5045 OVERLOOK ROAD NW  
 City WASHINGTON State DC Zip Code 20016-1911  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2408545069411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. BALTHAZOR, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2002 SUGARWOOD DRIVE  
 City ORONO State MN Zip Code 55356-9339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Segment COO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2437120769411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. COSGRIFF, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1875 HUNTER LANE  
 City MENDOTA HEIGHTS State MN Zip Code 55118-4110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Bus Unit CEO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2437121669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1153.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. EDELSON, BRETT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4600 DREXEL AVENUE  
 City EDINA State MN Zip Code 55424-1132  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2437127169411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. RAINEY, PETER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8850 COUNTY ROAD 26  
 City MINNETRISTA State MN Zip Code 55359-9445  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2437127569411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. HEYMAN, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5300 SHERRILL AVENUE  
 City CHEVY CHASE State MD Zip Code 20815-3720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Strategy & Partnerships  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2444265769411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1153.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. LANGER, DONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5110 OAK RAMBLING DRIVE  
 City KATY State TX Zip Code 77494-1971  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2445015469411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. SIEGEL, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 264 LAKEWOOD DRIVE  
 City BLOOMFIELD HILLS State MI Zip Code 48304-3531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Med Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 294.84

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2445017169411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. MCMAHON, DIRK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 WILDHURST ROAD  
 City EXCELSIOR State MN Zip Code 55331-8461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) President UHG & COO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2491457069411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 797.28  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 222
	<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 (UnitedHealth Group PAC)**

**A. NATHAN, DONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1643 SPRING CREEK DRIVE  
 City SARASOTA State FL Zip Code 34239-5046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) EVP, Senior Advisor  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2491457369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. SMITH, KARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3917 TERRY PLACE  
 City ALEXANDRIA State VA Zip Code 22304-1737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2540175369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. PURDY, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3615 THORNAPPLE STREET  
 City CHEVY CHASE State MD Zip Code 20815-4113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Strategy  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2541300669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1153.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 222
	<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 (UnitedHealth Group PAC)**

**A. RAMSAY, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 543 E LURAY AVE  
 City ALEXANDRIA State VA Zip Code 22301-1605  
 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 ▼ 1100.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2542542269411**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 P/R Deduction (\$50.00 Bi-Weekly)

**B. DAVENPORT, ALLISON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 141 PELHAM ROAD  
 City PHILADELPHIA State PA Zip Code 19119-2661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Clnt Svc Acct Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2552313669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. BRYANT, JEREMY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4534 MYSTIQUE WAY  
 City ROSWELL State GA Zip Code 30075-2087  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Clnt Mgmt NA Accts  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2552961369411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	561.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. COLEMAN, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 842 NAGLE STREET  
 City HOUSTON State TX Zip Code 77003-1266  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Ops  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2552961469411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. EHLMAN, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10051 VALLEY RIDGE COURT  
 City LAS VEGAS State NV Zip Code 89148-7602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Director Technology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2552962269411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**C. FLANNERY, SCOTT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8508 TRELADY CT  
 City PLANO State TX Zip Code 75024-6827  
 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 ▼ 2115.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2552962369411**  
 Amount of Each Receipt this Period 192.30  
 Memo Item  
 P/R Deduction (\$96.15 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	297.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 (UnitedHealth Group PAC)**

**A. JAMES, GREGORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2323 KINGS POINT DRIVE  
 City LARGO State FL Zip Code 33774-1009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Med Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2552963269411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. KIDAMBI, NARASIMHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18477 85TH AVE N  
 City MAPLE GROVE State MN Zip Code 55311-1663  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Assc Dir Bus Anlys  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2552963869411**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 P/R Deduction (\$20.00 Bi-Weekly)

**C. LOVELADY, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5378 BUENA VISTA DR  
 City FRISCO State TX Zip Code 75034-2253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Bus Ops  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2552964269411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	501.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. MORRIS, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2624 N HARTLAND COURT  
 City CHICAGO State IL Zip Code 60614-4955  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Acct Mgmt Natl Acct  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 338.36

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2552965069411**  
 Amount of Each Receipt this Period 30.76  
 Memo Item  
 P/R Deduction (\$15.38 Bi-Weekly)

**B. POTTER, DONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 116 FULLER LANE  
 City WINNETKA State IL Zip Code 60093-4213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Clint Svc Acct Mgt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 761.42

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2552965469411**  
 Amount of Each Receipt this Period 69.22  
 Memo Item  
 P/R Deduction (\$34.61 Bi-Weekly)

**C. SAMSEL, KRISTINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 91 WAVERLY RD  
 City HUNTINGTON State CT Zip Code 06484-5835  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2552965769411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	127.98
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. TINKER, ANN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 137 AMOHI WAY  
 City LOUDON State TN Zip Code 37774-3009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Compli  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2552966869411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**B. WACKER, AARON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4704 CAVAN ROAD  
 City MOUND State MN Zip Code 55364-1877  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Principal Engineer, TLCP  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2552967069411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**C. PROSKAUER, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 240 DERBY STREET  
 City NEWTON State MA Zip Code 02465-1006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Architecture  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 423.06

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2553475069411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	94.46
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. ZERAFA, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 61234 ADMIRAL DRIVE  
 City WASHINGTON TOWNSHIP State MI Zip Code 48094-1242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP IT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2553475769411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**B. REIDY, GREGORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1005 BLAKEFIELD DRIVE  
 City BRENTWOOD State TN Zip Code 37027-8479  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2554013369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. ALEXANDER, JOY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5116 NORTH TIOGA WAY  
 City LAS VEGAS State NV Zip Code 89149-5830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Health Plan of Nevada Occupation (for Individual) Dir Mktg  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2560064169411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	440.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. CLUTE, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7756 N 85TH STREET  
 City OMAHA State NE Zip Code 68122-1281  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Med Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2560064469411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. COY, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6970 SUZANNE COURT  
 City SCHENECTADY State NY Zip Code 12303-5285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2560064569411**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 P/R Deduction (\$10.00 Bi-Weekly)

**C. GAZELEY, PAULA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 36 MAYFAIR ROAD  
 City WYNANTSKILL State NY Zip Code 12198-8018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Clnt Svc Acct Mgt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2560064869411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	124.92
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. GIANCURSIO, DONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 72 MIDNIGHT RIDGE DR  
 City LAS VEGAS State NV Zip Code 89135-1680  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2560064969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. LOBERG, ANGELA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2837 EAST PARK PLACE  
 City MILWAUKEE State WI Zip Code 53211-3845  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SB KA VP Sls Acct Mgt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 946.13

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2560065569411**  
 Amount of Each Receipt this Period 176.93  
 Memo Item  
 P/R Deduction (\$138.47 Bi-Weekly)

**C. MILICH, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2702 BIRCHMERE COURT  
 City KATY State TX Zip Code 77450-1303  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2560066069411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	946.13
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 222
	<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 (UnitedHealth Group PAC)**

**A. VAIL, DENISE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 35 CLEVELAND AVENUE  
 City SAYVILLE State NY Zip Code 11782-1322  
 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 ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2560066869411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**B. DICKMAN, KRISTA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2533 ONYX DRIVE  
 City SHAKOPEE State MN Zip Code 55379-2770  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2560398169411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**C. NOEL, TIMOTHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4316 FREMONT AVENUE SOUTH  
 City MINNEAPOLIS State MN Zip Code 55409-1721  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2560398869411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	440.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. WULF, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 622 N 11TH ST  
 City WAUSAU State WI Zip Code 54403-5004  
 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 ▼ 252.72

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2560398969411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. OBRIEN, PATRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 33 BARRINGTON DRIVE  
 City BEDFORD State NH Zip Code 03110-5601  
 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 ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2560821469411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**C. LUND, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11471 NORTH SHORE DRIVE  
 City GRANTSBURG State WI Zip Code 54840-8059  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Tax  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 858.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2561457669411**  
 Amount of Each Receipt this Period 78.00  
 Memo Item  
 P/R Deduction (\$39.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	134.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. WILLSON, JOSH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 ADAMS CT  
 City COLLEYVILLE State TX Zip Code 76034-6811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) RVP SLS SB and Spec Ben  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2564802569411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. CARLSON, CHRISTOPHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10618 WEST RIVER ROAD  
 City BROOKLYN PARK State MN Zip Code 55443-1233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Prd  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2115.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2564802669411**  
 Amount of Each Receipt this Period 192.30  
 Memo Item  
 P/R Deduction (\$96.15 Bi-Weekly)

**C. HANSEN, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4960 SHADY ISLAND CIRCLE  
 City MOUND State MN Zip Code 55364-9218  
 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 ▼ 4194.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2564802769411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	669.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. GOODWIN, MARYELLEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3216 PLAYERS VIEW CIRCLE  
 City LONGWOOD State FL Zip Code 32779-3154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) KA VP SIs Acct Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2564802969411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**B. MARDEN, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 VAN MULEN STREET  
 City MAHWAH State NJ Zip Code 07430-2977  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2564803369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. MOQUIST, DARREN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5313 MINNEHAHA BLVD  
 City EDINA State MN Zip Code 55424-1406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Natl Regnl Pres  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2564803469411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	797.20
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. BELLMAN, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9120 BRANCH HOLLOW DR  
 City DALLAS State TX Zip Code 75243-7510  
 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 ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2564803569411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**B. CARTER, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1363 CHIPPENDALE RD  
 City HOUSTON State TX Zip Code 77018-5257  
 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 ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2565448769411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. KUNST, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4872 103RD STREET  
 City PLEASANT PRAIRIE State WI Zip Code 53158-6516  
 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 ▼ 1692.24

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2566302169411**  
 Amount of Each Receipt this Period 153.84  
 Memo Item  
 P/R Deduction (\$76.92 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	258.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 222
	<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 (UnitedHealth Group PAC)**

**A. STEARNS, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5118 FAIRGLEN LANE  
 City CHEVY CHASE State MD Zip Code 20815-6517  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP, Assistant to the OCEO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2571777969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. PARRILLO, CHRISTOPHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12 WOODSUM DRIVE  
 City NEWBURY State NH Zip Code 03255-6232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Ntwk Contrctng  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1694.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2571778269411**  
 Amount of Each Receipt this Period 154.00  
 Memo Item  
 P/R Deduction (\$77.00 Bi-Weekly)

**C. HINTON, DUSTIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address W132N6475 MARACH RD  
 City MENOMONEE FALLS State WI Zip Code 53051-6085  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2571978769411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	923.20
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 (UnitedHealth Group PAC)**

**A. GRAY, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6098 CLOPTON DRIVE  
 City GREENSBORO State NC Zip Code 27455-8373  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Ntwk Pricing  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 840.80

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2572588569411**  
 Amount of Each Receipt this Period 79.60  
 Memo Item  
 P/R Deduction (\$39.80 Bi-Weekly)

**B. ROBINSON, MARCUS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 590 SPENDER TRACE  
 City DUNWOODY State GA Zip Code 30350-5018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) CEO IFP & Chief Cnsmr/Grwth  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2572588969411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**C. JACQUET, SHAUN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 61040 E SHALE ROAD  
 City ORACLE State AZ Zip Code 85623-7481  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2572589369411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	135.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. CARLSON, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4511 BROWDALE AVENUE  
 City EDINA State MN Zip Code 55424-1142  
 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 ▼ 4212.15

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2572590069411**  
 Amount of Each Receipt this Period 392.00  
 Memo Item  
 P/R Deduction (\$196.00 Bi-Weekly)

**B. BECK, JOANNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 117 GLORIA LANE  
 City CADIZ State KY Zip Code 42211-8824  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Ntwk Contrctng  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2572590369411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. OBRIEN, CHRISTINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 931 FRENCH ST  
 City NEW ORLEANS State LA Zip Code 70124-3806  
 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 ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2572590669411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	448.08
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. MILLER, KIMBERLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16 CELONOVA PLACE  
 City Foothill Ranch State CA Zip Code 92610-1942  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Underwriting  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2572591269411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**B. WIFFLER, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3680 GRANDE BAY COURT  
 City Melbourne Beach State FL Zip Code 32951-3155  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Bus Unit CEO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2572992769411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. BENSON, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2206 EAGLE VALLEY LN  
 City Wausau State WI Zip Code 54403-8154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Assc Dir Sls Ops  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 317.24

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2573518969411**  
 Amount of Each Receipt this Period 28.84  
 Memo Item  
 P/R Deduction (\$14.42 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	441.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. MCGONIGLE, JENNIFER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19010 VALLEY DRIVE  
 City MINNETONKA State MN Zip Code 55345-6148  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Prd  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 318.15

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2574973169411**  
 Amount of Each Receipt this Period 90.90  
 Memo Item  
 P/R Deduction (\$45.45 Bi-Weekly)

**B. HARE, LESLIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9029 SHEEP RANCH CT  
 City LAS VEGAS State NV Zip Code 89143-5432  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2574979469411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**C. MASTERS, SCOTT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1894 VILLAGE GLEN DRIVE  
 City SAINT JOHNS State FL Zip Code 32259-9215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Ops  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 847.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2574979669411**  
 Amount of Each Receipt this Period 77.00  
 Memo Item  
 P/R Deduction (\$38.50 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	195.90
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. WOHNOUTKA, CHRISTOPHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17597 HIBISCUS AVE  
 City LAKEVILLE State MN Zip Code 55044-3906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Dir Tax  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2574981969411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. CIANFROCCO, HEATHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 913 CHAMPLAIN PLACE  
 City GIBSONIA State PA Zip Code 15044-8079  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) President, Optum  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2574986269411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. BURNETT, JAMIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4816 PENN AVENUE SOUTH  
 City MINNEAPOLIS State MN Zip Code 55419-5259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Tech Infrast Engineering  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 858.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2574988269411**  
 Amount of Each Receipt this Period 78.00  
 Memo Item  
 P/R Deduction (\$39.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	539.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 (UnitedHealth Group PAC)**

**A. STRAIT, DENISE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4362 SPORTSMAN CLUB RD  
 City JOHNSTOWN State OH Zip Code 43031-9461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.66

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2574989369411**  
 Amount of Each Receipt this Period 28.06  
 Memo Item  
 P/R Deduction (\$14.03 Bi-Weekly)

**B. LANG, HEATHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1210 RIVER TERRACE DRIVE  
 City BLOOMINGTON State MN Zip Code 55431-4230  
 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 ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2574991469411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. NEWKIRK, MEGHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10162 BEAVER CIR  
 City CYPRESS State CA Zip Code 90630-4113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Growth Strat  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575008769411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	133.06
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. SJOBLAD, BETHANY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 2ND STREET NE #510  
 City MINNEAPOLIS State MN Zip Code 55413-2541  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575009169411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. FLOWER, MARTIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address N54W20825 CARTERS CROSSING CIR  
 City MENOMONEE FALLS State WI Zip Code 53051-6281  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) KA Dir Acct Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 338.36

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575011669411**  
 Amount of Each Receipt this Period 30.76  
 Memo Item  
 P/R Deduction (\$15.38 Bi-Weekly)

**C. FORKER, JUDITH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5109 WEST 56TH STREET  
 City EDINA State MN Zip Code 55436-2427  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP People Team  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4123.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575013469411**  
 Amount of Each Receipt this Period 434.00  
 Memo Item  
 P/R Deduction (\$217.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	849.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 (UnitedHealth Group PAC)**

**A. KEMMER, HEIDI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2211 WEST ROCKROSE PLACE  
 City CHANDLER State AZ Zip Code 85248-4208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir, Health Plan Operations  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 311.08

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575021369411**  
 Amount of Each Receipt this Period 28.28  
 Memo Item  
 P/R Deduction (\$14.14 Bi-Weekly)

**B. MADDOX, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7810 HANOVER ST  
 City DALLAS State TX Zip Code 75225-8220  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575039569411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. HEATH, SEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1292 CASTLE CT  
 City GOLDEN VALLEY State MN Zip Code 55427-4453  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Compli  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575048769411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	440.96
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. FITZPATRICK, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3936 CAMPELLO CURVE  
 City CHASKA State MN Zip Code 55318-4639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Bus Dvlp  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575053769411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. LINDSAY, VIVIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14930 SW 39 ST  
 City DAVIE State FL Zip Code 33331-2767  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Med Clin Ops  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575054969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. CLACKO, MARY ANN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6358 COTEAU TRAIL  
 City EDEN PRAIRIE State MN Zip Code 55344-5205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Compli  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 807.66

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575057969411**  
 Amount of Each Receipt this Period 115.38  
 Memo Item  
 P/R Deduction (\$57.69 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	884.58
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. ALLEN, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11359 ENTREVAUX DRIVE  
 City EDEN PRAIRIE State MN Zip Code 55347-2862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) M A VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1692.24

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575060269411**  
 Amount of Each Receipt this Period 153.84  
 Memo Item  
 P/R Deduction (\$76.92 Bi-Weekly)

**B. CURRIE, ULYSSES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8232 GUNNAR DRIVE  
 City FULTON State MD Zip Code 20759-2218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Health Equity  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575064169411**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 P/R Deduction (\$30.00 Bi-Weekly)

**C. ZAETTA, CHRISTOPHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 214 PRINCE STREET  
 City ALEXANDRIA State VA Zip Code 22314-3314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Mkt Group Gen Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575068369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	598.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. VERCHICK, TAMI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9916 DUSTY WINDS AVE  
 City LAS VEGAS State NV Zip Code 89117-5986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Director Technology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575068969411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. ISMERT, JENNY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8494 E HAWAII LN  
 City DENVER State CO Zip Code 80231-2732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Planning & Strategy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575070069411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. ENLOW, MARGARET, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 196 SOMERSLY PL  
 City LEXINGTON State KY Zip Code 40515-5717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Ntwk Conctrctng  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575071069411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	181.92
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. NICHOLS, SANDRA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16900 CROWN BRIDGE DRIVE  
 City DELRAY BEACH State FL Zip Code 33446-2407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP CMO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575074569411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. BECK, RALPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address W155 N5314 SHARPTAIL COURT  
 City MENOMONEE FALLS State WI Zip Code 53051-6771  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir, Health Plan Operations  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575074969411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. BURNAM, DEBRA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 377 CALABRIA BEACH ST  
 City HENDERSON State NV Zip Code 89015-2430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Clin Ops  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575076269411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	440.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. ONEILL, AUDREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 71 CHESTNUT RIDGE RD  
 City QUEENSBURY State NY Zip Code 12804-7317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575089469411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

**B. VIESTA, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 COMPASS COURT  
 City OYSTER BAY State NY Zip Code 11771-1602  
 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 ▼ 4196.46

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575098569411**  
 Amount of Each Receipt this Period 396.00  
 Memo Item  
 P/R Deduction (\$198.00 Bi-Weekly)

**C. CHAMPION, PHEBE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 127 TAPATIO ST  
 City HENDERSON State NV Zip Code 89074-1934  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Health Plan of Nevada Occupation (for Individual) Dir Cust Service  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575108369411**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 P/R Deduction (\$25.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	484.46
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. HAYDEN, KARI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6109 BANEY COURT  
 City MINNETONKA State MN Zip Code 55345-6301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Strategy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575110369411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. MADDIGAN, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 845 FAITH COURT  
 City LONGMONT State CO Zip Code 80501-4712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Dir Product  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575114869411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. DOERFLER, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9163 WASSERMANN CT  
 City VICTORIA State MN Zip Code 55386-4592  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Dir Tax  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575131569411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	143.46
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 222
	<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 (UnitedHealth Group PAC)**

**A. HUNT, ZOE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4030 SERANGO COURT  
 City WEST LINN State OR Zip Code 97068-2840  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Med Clin Ops  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575136269411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**B. MCDONNEL, LISA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9664 LAFORET DRIVE  
 City EDEN PRAIRIE State MN Zip Code 55347-3538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Ntwk  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575136369411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$0.00 Bi-Weekly)

**C. DEWALL, PATRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7662 RIDGEVIEW WAY  
 City CHANHASSEN State MN Zip Code 55317-4507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Deputy Gen Counsel Mgr  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575145369411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	133.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 222
	<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 (UnitedHealth Group PAC)**

**A. MCGANN, JEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 VILLAGE ROAD  
 City FLORHAM PARK State NJ Zip Code 07932-2415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Acct Mgmt SB KA  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575146969411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. PETERSOHN, PATRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16413 BIRCH STREET  
 City OVERLAND PARK State KS Zip Code 66085-7842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) GP Reg VP of SIs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575148369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. THOMAS, DIANE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2701 KING JAMES AVE  
 City SAINT CHARLES State IL Zip Code 60174-7827  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Mkt Pres  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1692.24

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575156469411**  
 Amount of Each Receipt this Period 153.84  
 Memo Item  
 P/R Deduction (\$76.92 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	566.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. RAZVI, NIGHET, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1015 S CLINTON AVENUE  
 City OAK PARK State IL Zip Code 60304-1823  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Med Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 313.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR257516869411**  
 Amount of Each Receipt this Period 28.46  
 Memo Item  
 P/R Deduction (\$14.23 Bi-Weekly)

**B. HAMANN, CHAD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7638 RIDGEVIEW WAY  
 City CHANHASSEN State MN Zip Code 55317-4507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Tax  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2115.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575170169411**  
 Amount of Each Receipt this Period 192.30  
 Memo Item  
 P/R Deduction (\$96.15 Bi-Weekly)

**C. MELLO, STEPHANIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 179 HILTON LANE  
 City SWANSEA State MA Zip Code 02777-3809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575191369411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	248.84
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 (UnitedHealth Group PAC)**

**A. DEMARIS, PETER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2301 OLIVER AVE S  
 City MINNEAPOLIS State MN Zip Code 55405-2448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Mktg eComm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575191869411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. MUELLER, CYNTHIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 380 4TH AVE SOUTH  
 City NAPLES State FL Zip Code 34102-6383  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Clms  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575192269411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. CONDON, CRAIG, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 268 OAK LANDING WAY  
 City SEVERNA PARK State MD Zip Code 21146-3116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Bus Unit CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575203169411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	797.28
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. REDMOND, GRETA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 350 N MAIN STREET #444  
 City STILLWATER State MN Zip Code 55082-6758  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Underwriting  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4048.20

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575211369411**  
 Amount of Each Receipt this Period 474.00  
 Memo Item  
 P/R Deduction (\$237.00 Bi-Weekly)

**B. STORDAHL, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7001 W 175TH AVENUE  
 City EDEN PRAIRIE State MN Zip Code 55346-2161  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Chief Actuary  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4038.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575213069411**  
 Amount of Each Receipt this Period 192.30  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. MARTIN, PETER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7091 HIGHOVER DRIVE  
 City CHANHASSEN State MN Zip Code 55317-7572  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Bus Group Fin Leader  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575213669411**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 P/R Deduction (\$15.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	696.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. MEYERHOFER, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6624 IROQUOIS TRAIL  
 City EDINA State MN Zip Code 55439-1065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1269.18

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575214669411**  
 Amount of Each Receipt this Period 115.38  
 Memo Item  
 P/R Deduction (\$57.69 Bi-Weekly)

**B. WILSON, ADAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 336 SALEM CHURCH ROAD  
 City SUNFISH LAKE State MN Zip Code 55118-4719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1269.18

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575218669411**  
 Amount of Each Receipt this Period 115.38  
 Memo Item  
 P/R Deduction (\$57.69 Bi-Weekly)

**C. GOODMAN, CYNTHIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3717 BUCKEYE DRIVE  
 City MCKINNEY State TX Zip Code 75071-8453  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SB KA VP Sis  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 317.24

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575220169411**  
 Amount of Each Receipt this Period 28.84  
 Memo Item  
 P/R Deduction (\$14.42 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	259.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. SHORS, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4649 EWING AVENUE SOUTH  
 City MINNEAPOLIS State MN Zip Code 55410-1745  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR257522369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. SANTORO, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 OLD FIRE ROAD  
 City TRUMBULL State CT Zip Code 06611-1431  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575222669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. GRUNDHOEFER, BRYAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 317 SIDNEY BAKER STREET SOUTH SUITE 400 PMB 519  
 City KERRVILLE State TX Zip Code 78028-6150  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) CEO Med Grp Non Physn  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4224.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575232769411**  
 Amount of Each Receipt this Period 384.00  
 Memo Item  
 P/R Deduction (\$192.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1153.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. HOGAN, SCOTT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8289 GLENCOE DRIVE  
 City LAKE TOMAHAWK State WI Zip Code 54539-9245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Bus Unit CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575234869411**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 P/R Deduction (\$1000.00 Bi-Weekly)

**B. SHUEY, JOANNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2694 WEST CREEK DRIVE  
 City FRISCO State TX Zip Code 75033-4759  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) UHC SIs RVP KA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575241669411**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 P/R Deduction (\$10.00 Bi-Weekly)

**C. DIMARTINO, TIMOTHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 49605 KEYCOVE ST  
 City CHESTERFIELD State MI Zip Code 48047-2361  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SB KA VP SIs Acct Mgt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575248169411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1096.92
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 222
	<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 (UnitedHealth Group PAC)**

**A. BRANT, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 ROCKY BROOK ROAD  
 City WILTON State CT Zip Code 06897-1919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SB KA VP SIs Acct Mgt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575250269411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. KUETER, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1500 WINGATE DRIVE  
 City DELAWARE State OH Zip Code 43015-9200  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575255869411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. BACHMANN, ANITA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 815 NORTHERN SHORES POINT  
 City GREENSBORO State NC Zip Code 27455-3459  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575258469411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	846.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 222
	<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 (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. BROOMFIELD, ROBERT, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2023
Mailing Address 12501 WEST 156TH STREET		<b>Transaction ID : PR2575260469411</b>
City OVERLAND PARK	State KS	Zip Code 66221-2662
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 92.30
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Hlth Plan CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1015.30	P/R Deduction (\$46.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ZARN, MARY, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2023
Mailing Address 11192 BLUESTEM LANE		<b>Transaction ID : PR2575269169411</b>
City EDEN PRAIRIE	State MN	Zip Code 55347-4731
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 170.00
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Division CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1852.30	P/R Deduction (\$157.50 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. ZAFFIRIS, NICHOLAS, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2023
Mailing Address 1241 LAUREL CT		<b>Transaction ID : PR2575270669411</b>
City MARCO ISLAND	State FL	Zip Code 34145-2351
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 28.08
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Hlth Plan CEO	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 308.88	P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	290.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 222
	<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 (UnitedHealth Group PAC)**

**A. HAMBLIN, JILLIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3103 BEACON GROVE ST  
 City SPRING State TX Zip Code 77389-4348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575290369411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. MUELLER, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6895 LAKE HARRISON CIRCLE  
 City CHANHASSEN State MN Zip Code 55317-4589  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Ops  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575294569411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. HEWITT, SCOTT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1443 RAYMOND AVE  
 City SAINT PAUL State MN Zip Code 55108-1430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Ntwk Prgms  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1692.24

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575296769411**  
 Amount of Each Receipt this Period 153.84  
 Memo Item  
 P/R Deduction (\$76.92 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	307.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 222
	<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 (UnitedHealth Group PAC)**

**A. WEBER, ERIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1791 RESTHAVEN LANE  
 City MOUND State MN Zip Code 55364-1308  
 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 ▼ 4160.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR257529869411**  
 Amount of Each Receipt this Period 416.00  
 Memo Item  
 P/R Deduction (\$208.00 Bi-Weekly)

**B. PEEL, CHAD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7185 GUNFLINT TRAIL  
 City CHANHASSEN State MN Zip Code 55317-4743  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Hlthcare Econ  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1692.24

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575329869411**  
 Amount of Each Receipt this Period 153.84  
 Memo Item  
 P/R Deduction (\$76.92 Bi-Weekly)

**C. WHITE, WAYNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8727 W BUCKHORN TRL  
 City PEORIA State AZ Zip Code 85383-4852  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Cust Svs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575342369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	954.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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 (UnitedHealth Group PAC)**

**A. HUYSMAN, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 411 NORTH NEW RIVER DRIVE E # 904  
 City FORT LAUDERDALE State FL Zip Code 33301-3179  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.64

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575342669411**  
 Amount of Each Receipt this Period 19.24  
 Memo Item  
 P/R Deduction (\$9.62 Bi-Weekly)

**B. IMDIEKE, PATRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15900 WHITE PINE DRIVE  
 City WAYZATA State MN Zip Code 55391-2125  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Bus Anlys Cnslt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575347969411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. TELESKY, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2602 PENNINGTON PLACE  
 City VALPARAISO State IN Zip Code 46383-9163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SB KA VP Sls  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 858.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575350969411**  
 Amount of Each Receipt this Period 78.00  
 Memo Item  
 P/R Deduction (\$39.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. PHILLIPS, CHRISTINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 63 HERITAGE TRAIL  
 City SUFFIELD State CT Zip Code 06078-2376  
 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 ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575354069411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. GUSTIN, TODD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5717 AYRSHIRE BLVD  
 City EDINA State MN Zip Code 55436-2059  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4211.82

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575357769411**  
 Amount of Each Receipt this Period 393.80  
 Memo Item  
 P/R Deduction (\$196.90 Bi-Weekly)

**C. NIELSEN, MICHELE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 W 11TH STREET  
 City SHIP BOTTOM State NJ Zip Code 08008-6303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Ntwk Regn Pres  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575361769411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	498.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. COOK, JORDANA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 46 PALMETTO COVE COURT  
 City BLUFFTON State SC Zip Code 29910-9580  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Mktg  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2538.36

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575371669411**  
 Amount of Each Receipt this Period 230.76  
 Memo Item  
 P/R Deduction (\$115.38 Bi-Weekly)

**B. PIETROSIMONE, RALPH A, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 44 ROSES FARM ROAD  
 City EAST HAVEN State CT Zip Code 06512-4665  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Ntwk Prgm Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 209.44

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575373869411**  
 Amount of Each Receipt this Period 19.04  
 Memo Item  
 P/R Deduction (\$9.52 Bi-Weekly)

**C. CIAVARELLA, TRACY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 LORRAINE DRIVE  
 City BEACON FALLS State CT Zip Code 06403-1256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Compli  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575377969411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	277.88
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. FENLON, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4925 DREW AVE S  
 City MINNEAPOLIS State MN Zip Code 55410-1743  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Deputy Gen Counsel  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 201.52

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575392069411**  
 Amount of Each Receipt this Period 18.32  
 Memo Item  
 P/R Deduction (\$9.16 Bi-Weekly)

**B. BRATTEBO, CRAIG, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10202 HARMONY CIRCLE  
 City EDEN PRAIRIE State MN Zip Code 55347-5019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Deputy Gen Counsel  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575397269411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. FELLER, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3715 HUNTINGTON AVE  
 City ST LOUIS PARK State MN Zip Code 55416-4917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Technology  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575400369411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	479.84
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. ANDERSON, BRADLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4613 W 56TH ST  
 City EDINA State MN Zip Code 55424-1558  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Strategy  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575405269411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. VENKATESAN, CHANDRAMOULEESWARAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17698 62ND COURT NORTH  
 City MAPLE GROVE State MN Zip Code 55311-4619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Seg CIO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575410169411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. MILLER, ALLISON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11671 45TH PLACE NE  
 City SAINT MICHAEL State MN Zip Code 55376-4536  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Info Security  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2115.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575418169411**  
 Amount of Each Receipt this Period 192.30  
 Memo Item  
 P/R Deduction (\$96.15 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	653.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. GOTTHARD, CAROL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16492 BROOKLANE BOULEVARD  
 City NORTHVILLE State MI Zip Code 48168-8417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Fin  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 839.96

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575419169411**  
 Amount of Each Receipt this Period 76.36  
 Memo Item  
 P/R Deduction (\$38.18 Bi-Weekly)

**B. ARMSTRONG, LORI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 808 CAREN DRIVE  
 City ELDERSBURG State MD Zip Code 21784-8569  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) KA VP Acct Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575427969411**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 P/R Deduction (\$15.00 Bi-Weekly)

**C. OHARA, KARIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1431 HENRY COURT  
 City CHANHASSEN State MN Zip Code 55317-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Mkt Grp Controller  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4212.15

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575428769411**  
 Amount of Each Receipt this Period 392.00  
 Memo Item  
 P/R Deduction (\$196.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	498.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. MURLEY, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2775 COUNTRYSIDE DRIVE WEST  
 City ORONO State MN Zip Code 55356-9675  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575443669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. SPILKER, TIMOTHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32 FITCH LANE  
 City NEW CANAAN State CT Zip Code 06840-5051  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575446369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. RUNICE, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4622 BRUCE AVENUE  
 City EDINA State MN Zip Code 55424-1123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Treasury  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4059.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575451569411**  
 Amount of Each Receipt this Period 369.00  
 Memo Item  
 P/R Deduction (\$184.50 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1138.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 222
	<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 (UnitedHealth Group PAC)**

**A. PEGG, JACK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4917 KAMA LANE NE  
 City ALBERTVILLE State MN Zip Code 55301-3536  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Assc Dir Underwriting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575456069411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. GLATT, CHRISTOPHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 631 GOODRICH AVE  
 City SAINT PAUL State MN Zip Code 55105-3522  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Aviation Corp Pilots  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575464969411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

**C. PHINNEY, ASHLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 GATEHOUSE ROAD  
 City GRANBY State CT Zip Code 06035-1922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Director Technology  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575468469411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	94.62
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. SADUSKE, NANETTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4276 NICOLET DRIVE  
 City GREEN BAY State WI Zip Code 54311-9798  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Compli  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575470269411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. HENSEL, KRISTA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2211 HOMEWOOD DRIVE  
 City ANCHORAGE State KY Zip Code 40223-1326  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575482669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. BARTHEL, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20525 HARTFORD WAY  
 City LAKEVILLE State MN Zip Code 55044-4452  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Dir Software Engineering  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575484369411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	489.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 222
	<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 (UnitedHealth Group PAC)**

**A. MACLAUCHLAN, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 730 WYNDALE RD  
 City JENKINTOWN State PA Zip Code 19046-1552  
 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 ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575492769411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. VESLEDAHL, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15598 MICHELE LANE  
 City EDEN PRAIRIE State MN Zip Code 55346-2548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) NVP Network  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575499269411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. DELREAL, MAGDALENA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 122 WILLOW CREEK LANE  
 City WILLOW SPRINGS State IL Zip Code 60480-1274  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) GP Reg Market Growth Dir  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575507769411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	440.76
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. MUNSON, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4707 HAZELTINE LANE  
 City EAGAN State MN Zip Code 55123-2172  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Compli  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2115.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575512469411**  
 Amount of Each Receipt this Period 192.30  
 Memo Item  
 P/R Deduction (\$96.15 Bi-Weekly)

**B. HUNTER, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5420 COUNTRYSIDE ROAD  
 City EDINA State MN Zip Code 55436-2524  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Prd  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575528369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. HERNANDEZ, MAYRENE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 850 SW 189TH AVENUE  
 City PEMBROKE PINES State FL Zip Code 33029-6047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Med Dir  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575529269411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	653.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 222
	<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 (UnitedHealth Group PAC)**

**A. HOLOVANIA, KRISTEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4610 LAKEVIEW DRIVE  
 City EDINA State MN Zip Code 55424-1518  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575533069411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. HAMLIN, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2800 NEWMAN  
 City HOUSTON State TX Zip Code 77098-1408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Behvrl Med Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575536269411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. SULLIVAN, EILEEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9675 WATERWAY PASSAGE DRIVE  
 City WINTER GARDEN State FL Zip Code 34787-4957  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Assc Gen Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575537269411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	489.60
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. HAUF, NADINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1008 WIMBERLY COURT  
 City ALLEN State TX Zip Code 75013-1195  
 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 ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2575538869411**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item  
 P/R Deduction (\$10.00 Bi-Weekly)

**B. SUN, TONY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8408 ENSLEY PLACE  
 City LEAWOOD State KS Zip Code 66206-1402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) NA Med Dir/CMO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2575540269411**  
 Amount of Each Receipt this Period  
 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. WENTZIEN, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6350 SUMMIT CIRCLE  
 City CHANHASSEN State MN Zip Code 55317-9138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Bus Unit CEO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2093.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2575540869411**  
 Amount of Each Receipt this Period  
 198.00  
 Memo Item  
 P/R Deduction (\$99.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	294.92
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. ZMUDA, JENNIFER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 656 SUMMIT AVE  
 City SAINT PAUL State MN Zip Code 55105-3435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Seg CIO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575544069411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

**B. STEINBRECHER, HOLLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1800 N FIELD ST APT 4211  
 City DALLAS State TX Zip Code 75202-2782  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Bus Dev  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575544569411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. BALCK, AMY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address N3681 VINE RD  
 City FREEDOM State WI Zip Code 54913-6928  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) KA Dir Acct Mgmt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575548469411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	812.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. CARLSON, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 695 FOUNTAINHEAD WAY  
 City NAPLES State FL Zip Code 34103-2736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Exe Search & Mkt Intlnc  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 3906.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575573769411**  
 Amount of Each Receipt this Period 434.00  
 Memo Item  
 P/R Deduction (\$217.00 Bi-Weekly)

**B. BANSAL, SACHIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3920 BLACK OAKS LANE N  
 City PLYMOUTH State MN Zip Code 55446-2609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Bus Group Fin Leader  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 833.32

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575579469411**  
 Amount of Each Receipt this Period 833.32  
 Memo Item  
 P/R Deduction (\$416.66 Bi-Weekly)

**C. MILLER, MAXIMILLIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5328 CHOWEN AVENUE S  
 City MINNEAPOLIS State MN Zip Code 55410-2122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) M A VP  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575579569411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 1344.24  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. LYON, JAMIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2069 CIRCLE DRIVE  
 City KRONENWETTER State WI Zip Code 54455-9062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2575585969411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. FINCH, ANNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 208 STATION CIR NO  
 City HUDSON State WI Zip Code 54016-9555  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP IT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2575586669411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. SOLLER, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1120 S 2ND STREET UNIT 614  
 City MINNEAPOLIS State MN Zip Code 55415-1375  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Seg CIO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2575586769411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	489.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. GISCH, SHAWNA, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2023 <b>Transaction ID : PR2575592169411</b>
Mailing Address 320 PRESERVE COURT		Amount of Each Receipt this Period 384.60
City CHANHASSEN	State MN	Zip Code 55317-8717
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) Bus Unit CEO	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.60	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. MILLER, MICHAEL, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2023 <b>Transaction ID : PR2575595669411</b>
Mailing Address 656 OCEAN AVENUE 1016		Amount of Each Receipt this Period 384.60
City REVERE	State MA	Zip Code 02151-6201
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) VP Business Development Exe	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.60	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. IVERSON, LISA, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2023 <b>Transaction ID : PR2575603269411</b>
Mailing Address 1330 EDGCUMBE RD		Amount of Each Receipt this Period 384.60
City SAINT PAUL	State MN	Zip Code 55116-1780
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) VP Strat Initiv	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 4230.60	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1153.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. GOODMAN, BENJAMIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13828 EVERGREEN COURT  
 City APPLE VALLEY State MN Zip Code 55124-9257  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Segment CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575603869411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. KING, SARAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 247 MONTIBELLO DRIVE  
 City MOORESVILLE State NC Zip Code 28117-9139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Segment CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4038.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575612869411**  
 Amount of Each Receipt this Period 192.30  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. WAULTERS, SCOTT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3344 SHOAL WAY  
 City POWELL State OH Zip Code 43065-0501  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575622169411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	961.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 222
	<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 (UnitedHealth Group PAC)**

**A. THOMPSON, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17829 63RD AVE N  
 City MAPLE GROVE State MN Zip Code 55311-4650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) EVP UHC CEO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575634669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. WILSON, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2420 DURHAM MANOR DRIVE  
 City FRANKLIN State TN Zip Code 37064-5266  
 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 ▼ 4224.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575636169411**  
 Amount of Each Receipt this Period 384.00  
 Memo Item  
 P/R Deduction (\$192.00 Bi-Weekly)

**C. CLARK, TERENCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 COOPER AVENUE  
 City EDINA State MN Zip Code 55436-1315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) EVP, Chief Cust Mktg Officer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575636969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1153.20
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. CABANILLAS, MARIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2411 WORDSWORTH ST  
 City HOUSTON State TX Zip Code 77030-1833  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575637369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. COLLINS, NEIL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8465 MISSION HILLS LANE  
 City CHANHASSEN State MN Zip Code 55317-7712  
 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 ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575637669411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**C. HAYHURST, JENNY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23A MOUNT HYGEIA ROAD  
 City FOSTER State RI Zip Code 02825-1434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Ntwk Contrctng  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575651869411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	440.60
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. MULLIGAN, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 28 WHETTEN ROAD  
 City WEST HARTFORD State CT Zip Code 06117-2856  
 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 ▼ 4160.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575656869411**  
 Amount of Each Receipt this Period 416.00  
 Memo Item  
 P/R Deduction (\$208.00 Bi-Weekly)

**B. KANE, HEATHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7624 N MOUNTAIN VIEW PASS  
 City PARADISE VALLEY State AZ Zip Code 85253-2844  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575657469411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. WARSHAW, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 94 CARLSON DRIVE  
 City PORTLAND State CT Zip Code 06480-1699  
 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 ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575665569411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	828.68
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. EVERETT, RICARDO, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10507 WALPOLE LANE  
 City AUSTIN State TX Zip Code 78739-1554  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Ntwk Prgms  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575667669411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. ALLEN, CARL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8675 AZURE SKY DRIVE  
 City LAS VEGAS State NV Zip Code 89129-2227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) NA Med Dir/CMO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 858.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575669369411**  
 Amount of Each Receipt this Period 78.00  
 Memo Item  
 P/R Deduction (\$39.00 Bi-Weekly)

**C. BOGATYRENKO, VICTORIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 98 FIVE MILE RIVER ROAD  
 City DARIEN State CT Zip Code 06820-6234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Ntwk Contrctng  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1266.98

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575675469411**  
 Amount of Each Receipt this Period 115.18  
 Memo Item  
 P/R Deduction (\$57.59 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	221.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. MITCHELL, JILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11499 ASHLEY COURT  
 City INVER GROVE HEIGHTS State MN Zip Code 55077-5251  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Regn Pres Ntwk Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4196.46

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR257568369411**  
 Amount of Each Receipt this Period 396.00  
 Memo Item  
 P/R Deduction (\$198.00 Bi-Weekly)

**B. SIMONSON, KELLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10982 SANCTUARY COVE COURT  
 City LAS VEGAS State NV Zip Code 89135-9126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Health Plan of Nevada Occupation (for Individual) VP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1015.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575682369411**  
 Amount of Each Receipt this Period 92.30  
 Memo Item  
 P/R Deduction (\$46.15 Bi-Weekly)

**C. STIDMAN, CHRISTOPHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6504 CHEROKEE TRAIL  
 City EDINA State MN Zip Code 55439-1109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575683869411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	872.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. OCHIPINTI, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **26 SOUTH STREET  
UNIT 1 RIGHT**

City **ANNAPOLIS** State **MD** Zip Code **21401-2652**

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 ▼ **4230.60**

Date of Receipt **10 / 31 / 2023**  
**Transaction ID : PR2575685769411**

Amount of Each Receipt this Period **384.60**

Memo Item

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

**B. KALBACHER, JEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **4952 EAST DARTMOUTH STREET**

City **MESA** State **AZ** Zip Code **85205-6458**

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 ▼ **1946.12**

Date of Receipt **10 / 31 / 2023**  
**Transaction ID : PR2575688369411**

Amount of Each Receipt this Period **176.92**

Memo Item

P/R Deduction (\$88.46 Bi-Weekly)

**C. KOENIG, TIMOTHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **509 ORLANDO AVE**

City **ORELAND** State **PA** Zip Code **19075-1223**

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 ▼ **4200.00**

Date of Receipt **10 / 31 / 2023**  
**Transaction ID : PR2575702269411**

Amount of Each Receipt this Period **400.00**

Memo Item

P/R Deduction (\$200.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>961.52</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. THIERY, LINDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 999 LABEAUX AVE NE  
 City HANOVER State MN Zip Code 55341-9292  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Bus Group Fin Leader  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4084.11

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575707869411**  
 Amount of Each Receipt this Period 457.86  
 Memo Item  
 P/R Deduction (\$228.93 Bi-Weekly)

**B. VOLLRATH, MICHELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7647 MARKER ROAD  
 City SAN DIEGO State CA Zip Code 92130-5616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) URS VP Clnt Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1269.18

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575719869411**  
 Amount of Each Receipt this Period 115.38  
 Memo Item  
 P/R Deduction (\$57.69 Bi-Weekly)

**C. CAIN, STEVE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 COUNTRYSIDE CT  
 City DANVILLE State CA Zip Code 94506-1126  
 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 ▼ 2538.36

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575724369411**  
 Amount of Each Receipt this Period 230.76  
 Memo Item  
 P/R Deduction (\$115.38 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	804.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. MCKEE, PATRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6500 TRANQUIL RIVER LANE  
 City WAUSAU State WI Zip Code 54401-3302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575726769411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

**B. HELLAND, ROBYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9089 PARTRIDGE RD  
 City MINNETRISTA State MN Zip Code 55375-4513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Care Advo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575733869411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. GROSKLAGS, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3233 TIMBERWOLF CIRCLE  
 City PRIOR LAKE State MN Zip Code 55372-3272  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Mkt Group CFO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2115.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575735769411**  
 Amount of Each Receipt this Period 192.30  
 Memo Item  
 P/R Deduction (\$96.15 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	258.84
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. WINKEY, TRAVIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 310 FERNDAL RD W  
 City WAYZATA State MN Zip Code 55391-1511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) OH President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575735869411**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 P/R Deduction (\$5000.00 Bi-Weekly)

**B. MURRAY, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 CIRCLE WEST  
 City EDINA State MN Zip Code 55436-1313  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575736569411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. LEWIS, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 675 PLEASANT VIEW ROAD  
 City CHANHASSEN State MN Zip Code 55317-9509  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Actuary  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3356.46

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575737469411**  
 Amount of Each Receipt this Period 316.00  
 Memo Item  
 P/R Deduction (\$158.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5700.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. CESARETTI, GINA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5020 CIRCLE DOWN  
 City GOLDEN VALLEY State MN Zip Code 55416-1304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Compli/Sr Dep Gen Cnsl  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2575739069411**  
 Amount of Each Receipt this Period  
 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. STRICKLAND, JULIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3207 SUNNYWOOD DRIVE  
 City FULLERTON State CA Zip Code 92835-1858  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Mktg Bus Dev  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2575740969411**  
 Amount of Each Receipt this Period  
 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**C. PORTZ, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2119 SHERIDAN HILLS RD  
 City WAYZATA State MN Zip Code 55391-2327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP FP&A  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2575744569411**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	812.60
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. PROBST, PETER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1927 SAUNDERS AVENUE  
 City SAINT PAUL State MN Zip Code 55116-2016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Clin Affordability  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575744669411**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 P/R Deduction (\$100.00 Bi-Weekly)

**B. PINERSKI, JENNIFER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7501 HART LN  
 City AUSTIN State TX Zip Code 78731-2237  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575752869411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. FULTON, RYAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 805 LANEWOOD LANE NORTH  
 City PLYMOUTH State MN Zip Code 55447-4347  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575756969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	661.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. EKLO, BENJAMIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3942 CAMPELLO CURVE  
 City CHASKA State MN Zip Code 55318-4639  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575761869411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. HOWARTH, CRAIG, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1820 NAPOLI DRIVE  
 City APEX State NC Zip Code 27502-9659  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP IT  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575762469411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. NEESE, LARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 309 DUNLEIGH COURT  
 City MADISON State MS Zip Code 39110-6806  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) KA Sr Acct Exe Acct Opt Out Mk  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 338.36

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575766169411**  
 Amount of Each Receipt this Period 30.76  
 Memo Item  
 P/R Deduction (\$15.38 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	492.28
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. PAIK, JESSICA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 BUTTONWOOD LANE EAST  
 City RUMSON State NJ Zip Code 07760-1010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Bus Unit CEO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575783169411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. MADDUX, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16426 FARMERS MILL LANE  
 City CHESTERFIELD State MO Zip Code 63005-4549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Pharmacy Programs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4193.04

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575783869411**  
 Amount of Each Receipt this Period 398.00  
 Memo Item  
 P/R Deduction (\$199.00 Bi-Weekly)

**C. SUAREZ, MARIO, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21294 SMOKEHOUSE CT  
 City ASHBURN State VA Zip Code 20147-5316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Product  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575787369411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	859.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. BERGDOLL, JENNIFER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 230 HARRIS PEAK ST  
 City LAS VEGAS State NV Zip Code 89138-6351  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP People Team  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2575793769411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. MAURER, CARRIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10204 NEWPORT PATH  
 City WOODBURY State MN Zip Code 55129-4428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Segment CMO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2575798169411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

**C. SANKEN, SARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3018 ASPEN LAKE DRIVE  
 City BLAINE State MN Zip Code 55449-7517  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP People Team  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2575798569411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	505.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. WIX, LACOSTA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 402 JULIA STREET  
 APARTMENT 403  
 City NEW ORLEANS State LA Zip Code 70130-3699  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Assc Gen Counsel  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2575800069411**  
 Amount of Each Receipt this Period  
 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. GALIAN, SANDRA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 120 SEQUAMS LANE WEST  
 City WEST ISLIP State NY Zip Code 11795-4549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Ntwk Prgms  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2575803269411**  
 Amount of Each Receipt this Period  
 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. RUSSELL, LAURIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3108 SONIA DRIVE  
 City LAS VEGAS State NV Zip Code 89107-3246  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 858.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2575812169411**  
 Amount of Each Receipt this Period  
 78.00  
 Memo Item  
 P/R Deduction (\$39.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	231.84
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. LATINO, DAYNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 BROOK CROSSING EXTENSION  
 City ELLINGTON State CT Zip Code 06029-2247  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Chief of Staff  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 896.13

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575813269411**  
 Amount of Each Receipt this Period 126.93  
 Memo Item  
 P/R Deduction (\$88.47 Bi-Weekly)

**B. SCHENEMAN, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 428 8TH ST  
 City HUNTINGTON BEACH State CA Zip Code 92648-4629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Clin Affordability  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575813469411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. TAYLOR, DUSTIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5430 E BLOOMFIELD RD  
 City SCOTTSDALE State AZ Zip Code 85254-4202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Regn Pres Ntwk Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575818169411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	280.77
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. MCNATT, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4945 CANDACRAIG  
 City ALPHARETTA State GA Zip Code 30022-6340  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP SIs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575824969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. SCHMITT, MARIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3045 25TH AVENUE  
 City SAN FRANCISCO State CA Zip Code 94132-1541  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) NA VP Clnt Relationship  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575830069411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. HARPER, JENNIFER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8206 WEST 16TH STREET  
 City SAINT LOUIS PARK State MN Zip Code 55426-1904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Deputy Gen Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4193.04

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575835569411**  
 Amount of Each Receipt this Period 398.00  
 Memo Item  
 P/R Deduction (\$199.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	859.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. JERDE, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9324 N AERIE CLIFF  
 City FOUNTAIN HILLS State AZ Zip Code 85268-6358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Med Clin Ops  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1269.18

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575837469411**  
 Amount of Each Receipt this Period 115.38  
 Memo Item  
 P/R Deduction (\$57.69 Bi-Weekly)

**B. MANDELL, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 720 MISSION HILL WAY  
 City COLORADO SPRINGS State CO Zip Code 80921-2672  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Med Dir  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575837869411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. HARRISON, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10603 MILLET SEED HILL  
 City COLUMBIA State MD Zip Code 21044-4150  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Med Dir  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575840369411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	171.54
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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 (UnitedHealth Group PAC)**

**A. BOROCH, BLAIR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 800 BELFRY DRIVE  
 City BLUE BELL State PA Zip Code 19422-1210  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575849969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. AAFEDT, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5104 SKYLINE DRIVE  
 City EDINA State MN Zip Code 55436-1354  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Mktg Bus Dev  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 384.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575864169411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. COTTINGTON, NYLE BRENT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15050 47TH STREET NE  
 City SAINT MICHAEL State MN Zip Code 55376-1613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Bus Segment Controller  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575865369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1153.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. ADAMO, BRENT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3109 E DESERT LN  
 City PHOENIX State AZ Zip Code 85042-7198  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP, Software Engineering  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575867869411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. PEZHMAN, PAYMAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2825 MAPLEWOOD CIRCLE E  
 City WAYZATA State MN Zip Code 55391-2633  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575883569411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. RICHARDSON, KRISTIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 139 BALL GAP ROAD  
 City ARDEN State NC Zip Code 28704-8748  
 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 ▼ 4200.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575890969411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	861.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. SCHMUKER, ERIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2575 TALL TIMBER COURT SE  
 City GRAND RAPIDS State MI Zip Code 49546-6787  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UHC International Services Inc Occupation (for Individual) SVP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4198.23

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR257590669411**  
 Amount of Each Receipt this Period 398.00  
 Memo Item  
 P/R Deduction (\$199.00 Bi-Weekly)

**B. ALT, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 813 FERNWOOD ROAD  
 City MOORESTOWN State NJ Zip Code 08057-1362  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Ntwk Prgms  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575907369411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. MARGHERIO, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6412 JEFFERSON STREET  
 City KANSAS CITY State MO Zip Code 64113-1542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SB KA VP Sls Acct Mgt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575916369411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	503.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. CZAJKA, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8590 BIG MANGROVE DRIVE  
 City FORT MYERS State FL Zip Code 33908-7694  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Dir People Team  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575918669411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

**B. OLSON, TRUDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7208 WOODDALE AVE SOUTH  
 City EDINA State MN Zip Code 55435-4156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP People Team  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575918769411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. MCGOLDRICK, CHRISTOPHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 48 MOUNTAIN TERRACE ROAD  
 City WEST HARTFORD State CT Zip Code 06107-1533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) NA VP SIs & Bus Dev  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575930469411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	499.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. MATTERA, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 LOCUST HILLS DRIVE  
 City WAYZATA State MN Zip Code 55391-1973  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) UHG Chief Dev Officer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575938469411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. RILEY, FELICITY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3330 EDMUND BLVD  
 City MINNEAPOLIS State MN Zip Code 55406-2348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Tax  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575943369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. DONAHUE, JEANINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 164 MORNINGSIDE DRIVE  
 City MANDEVILLE State LA Zip Code 70448-7571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Ntwk Prgms  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575959269411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	846.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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 (UnitedHealth Group PAC)**

**A. LEMKE, HEATHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4135 TRILLIUM LANE EAST  
 City MINNETRISTA State MN Zip Code 55364-7730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP People Team  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4206.07

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575965869411**  
 Amount of Each Receipt this Period 396.00  
 Memo Item  
 P/R Deduction (\$198.00 Bi-Weekly)

**B. FRANK, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1373 PRAIRIE MEADOW RD  
 City MINNETRISTA State MN Zip Code 55359-6701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Chief Clin Off  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575970469411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. DICELLO, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 619 SAND CRANE CT  
 City BRADENTON State FL Zip Code 34212-5226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Regn Pres Ntwk Mgmt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575977969411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	808.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 222
	<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 (UnitedHealth Group PAC)**

**A. SIEBERT, GREGORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 46 VIA BELLEZA  
 City SAN CLEMENTE State CA Zip Code 92673-6910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Ntwk Contrctng  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575979669411**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 P/R Deduction (\$100.00 Bi-Weekly)

**B. RICHARDS, ALISON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 257 WEST GRANTLEY  
 City ELMHURST State IL Zip Code 60126-2237  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Division CEO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575987969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. GOLD, PAMELA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2821 E SWISS OAKS DR  
 City SANDY State UT Zip Code 84093-6587  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SB KA VP Sls Acct Mgt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575988669411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	612.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. SCHULTZ, STACY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4012 S XERXES AVENUE  
 City MINNEAPOLIS State MN Zip Code 55410-1146  
 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 ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2575990969411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. BRIGGS, MARC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13534 TUSCALEE HILL CIR  
 City DRAPER State UT Zip Code 84020-5653  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576001669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. SCHOENER, SHAUN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 884 LAS PALOMAS DR  
 City LAS VEGAS State NV Zip Code 89138-5001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Health Plan of Nevada Occupation (for Individual) SB KA VP Sls Acct Mgt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 359.48

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576012769411**  
 Amount of Each Receipt this Period 32.68  
 Memo Item  
 P/R Deduction (\$16.34 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	494.20
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. SONERHOLM, KIMBERLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12389 FOXTAIL RUN AVENUE  
 City LAS VEGAS State NV Zip Code 89138-6279  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576033269411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. HOLZERSPARR, CYNTHIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 BRIDGHAM FARM ROAD  
 City RUMFORD State RI Zip Code 02916-1304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Med Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576034869411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. MOSHER, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4201 SUNSET DRIVE #108  
 City SPRING PARK State MN Zip Code 55384-4515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Info Tech  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.20

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576038569411**  
 Amount of Each Receipt this Period 83.32  
 Memo Item  
 P/R Deduction (\$41.66 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	496.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. BYRNES, CHRISTOPHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3920 GLENWOOD STREET  
 City DULUTH State MN Zip Code 55804-1403  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576042869411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. STONE, LAURA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1485 COUNTY RD 286  
 City COLLINSVILLE State TX Zip Code 76233-2389  
 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 ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576045169411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. GROENENDAAL, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 620 FOREST AVENUE  
 City RIVER FOREST State IL Zip Code 60305-1710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Executive Compensation  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576046269411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	489.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. NELSON, KRISTA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18202 SHAVERS LAKE DRIVE  
 City WAYZATA State MN Zip Code 55391-3338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP UHC Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576047969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. CARTER, JEREMY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1081 LAKE SUSAN DR  
 City CHANHASSEN State MN Zip Code 55317-9337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Dir Tax  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 253.66

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576049569411**  
 Amount of Each Receipt this Period 23.06  
 Memo Item  
 P/R Deduction (\$11.53 Bi-Weekly)

**C. MONICAL, KENT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9795 E PIEDRA DRIVE  
 City SCOTTSDALE State AZ Zip Code 85255-9231  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576051369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	792.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. HUANG, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6838 IDLEWOOD WAY  
 City EDEN PRAIRIE State MN Zip Code 55346-3519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Bus Group Fin Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576059969411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. REX, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 503 HARRINGTON ROAD  
 City WAYZATA State MN Zip Code 55391-1512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) UHG CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576060069411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. MCEWAN, JOSHUA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4916 ALDRICH AVE SOUTH  
 City MINNEAPOLIS State MN Zip Code 55419-5353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Tax  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576085769411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	846.12
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 222
	<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 (UnitedHealth Group PAC)**

**A. FREIBERG, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9605 LEXINGTON CT  
 City WESTON State WI Zip Code 54476-6730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Cust Strategy  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1692.24

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576093669411**  
 Amount of Each Receipt this Period 153.84  
 Memo Item  
 P/R Deduction (\$264.42 Bi-Weekly)

**B. OLUJIC, TAMMY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 36218 SE SAINT ANDREWS LANE  
 City SNOQUALMIE State WA Zip Code 98065-9094  
 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 ▼ 338.36

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576097369411**  
 Amount of Each Receipt this Period 30.76  
 Memo Item  
 P/R Deduction (\$15.38 Bi-Weekly)

**C. PALMER, BRYAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 346 COUNTRY CLUB DRIVE  
 City TEQUESTA State FL Zip Code 33469-1944  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576097969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	569.20
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. DAHL, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12500 NW 20TH AVE  
 City VANCOUVER State WA Zip Code 98685-2304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Compli  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576100269411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. KIEWEL, NATHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1137 PRAIRIE VIEW DR SW  
 City HUTCHINSON State MN Zip Code 55350-6725  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Principal Engineer, TLCP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576117569411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**C. SANCHEZ, VINCENT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5025 BRANFORD COURT  
 City DUBLIN State CA Zip Code 94568-7241  
 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 ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576126969411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	84.16
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. LIRETTE, KARL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **9 WEST WOODLAWN DRIVE**  
 City **DESTREHAN** State **LA** Zip Code **70047-2535**  
 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 ▼ **846.12**

Date of Receipt **10 / 31 / 2023**  
**Transaction ID : PR2576138969411**  
 Amount of Each Receipt this Period **76.92**  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. FRIDNER, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **782 PENFIELD DR**  
 City **CAROL STREAM** State **IL** Zip Code **60188-4738**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **United HealthCare Services Inc** Occupation (for Individual) **SB NA VP SIs/Gen**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **858.00**

Date of Receipt **10 / 31 / 2023**  
**Transaction ID : PR2576147569411**  
 Amount of Each Receipt this Period **78.00**  
 Memo Item  
 P/R Deduction (\$39.00 Bi-Weekly)

**C. SCOTT, GARLAND, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **111 CASTLE POND DRIVE**  
 City **WINSTON SALEM** State **NC** Zip Code **27107**  
 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 ▼ **403.83**

Date of Receipt **10 / 31 / 2023**  
**Transaction ID : PR2576151069411**  
 Amount of Each Receipt this Period **19.23**  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>174.15</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. LENTZ, MICHEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4004 FOREST GLEN DRIVE  
 City GREENSBURG State PA Zip Code 15601-9062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Exec Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1269.18

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576153569411**  
 Amount of Each Receipt this Period 115.38  
 Memo Item  
 P/R Deduction (\$57.69 Bi-Weekly)

**B. WARN, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2079 AUSTRIAN PINE LN  
 City MINNETONKA State MN Zip Code 55305-2429  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP FP&A  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576157869411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

**C. BENSON, JEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14951 HIGHLAND COURT NE  
 City PRIOR LAKE State MN Zip Code 55372-4109  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2576310969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	538.44
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. PETSCH, JESSE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4705 CHOWEN AVE SOUTH  
 City MINNEAPOLIS State MN Zip Code 55410-1732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Pharm PA/Appeals  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 318.15

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2578705969411**  
 Amount of Each Receipt this Period 90.90  
 Memo Item  
 P/R Deduction (\$45.45 Bi-Weekly)

**B. SAINATO, KRISTIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 CARLTON TER  
 City STEWART MANOR State NY Zip Code 11530-3821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Clin Qlty  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.66

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2578715069411**  
 Amount of Each Receipt this Period 28.06  
 Memo Item  
 P/R Deduction (\$14.03 Bi-Weekly)

**C. COMBSMORGAN, LAURIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4334 MOUNT ZION ROAD  
 City SPRINGFIELD State TN Zip Code 37172-7008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Ntwk Conctrctng  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 422.40

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2578719869411**  
 Amount of Each Receipt this Period 38.40  
 Memo Item  
 P/R Deduction (\$19.20 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	157.36
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 222
	<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 (UnitedHealth Group PAC)**

**A. EGELAND, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2659 E LAKE OF THE ISLES PKWY  
 City MINNEAPOLIS State MN Zip Code 55408-1052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Bus Dev  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2578741069411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. DUFFEY, KRISTY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 42095 N 109TH PLACE  
 City SCOTTSDALE State AZ Zip Code 85262-3293  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Chief Nursing Officer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2578823269411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. BUSBEE, NATHANAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 122 ROSEWOOD AVE  
 City CATONSVILLE State MD Zip Code 21228-4938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Bus Process  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2578826769411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	846.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. ELLIS, DENNIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6001 DRIPPING SPRINGS  
 City FRISCO State TX Zip Code 75034-4039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SB KA VP SIs Acct Mgt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.36

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2595209169411**  
 Amount of Each Receipt this Period 32.76  
 Memo Item  
 P/R Deduction (\$16.38 Bi-Weekly)

**B. HAREWOOD, JUNIOR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 158 HAMPTON ROAD  
 City GARDEN CITY State NY Zip Code 11530-1404  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2595231569411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. BHATNAGAR, UPASANA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13022 HIGHGROVE ROAD  
 City HIGHLAND State MD Zip Code 20777-9587  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP CMO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3181.78

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2601127469411**  
 Amount of Each Receipt this Period 909.08  
 Memo Item  
 P/R Deduction (\$454.54 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1326.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. LESTER, SHAUNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20550 PARKVIEW LANE  
 City SHOREWOOD State MN Zip Code 55331-4529  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2601154769411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. FRIAS, LORRAINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2116 STANFORD AVENUE  
 City SAINT PAUL State MN Zip Code 55105-1219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Comm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2601159069411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. KIMES, CARRIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1917 SW 27TH STREET  
 City TOPEKA State KS Zip Code 66611-1643  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2601162069411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	143.46
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 222		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. PERERA, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1201 UNITY AVE N  
 City GOLDEN VALLEY State MN Zip Code 55422-4735  
 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 ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2601168869411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. ESCHERJR, DELBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 885 SUGAR HILL DRIVE  
 City MANCHESTER State MO Zip Code 63021-6665  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Med Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.66

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2601171069411**  
 Amount of Each Receipt this Period 28.06  
 Memo Item  
 P/R Deduction (\$14.03 Bi-Weekly)

**C. HUDSON, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1536 BREWSTER DRIVE  
 City CARROLLTON State TX Zip Code 75010-6444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir, Health Plan Operations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2605703069411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	132.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. MCBEATH, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2537 RED ARROW DRIVE  
 City LAS VEGAS State NV Zip Code 89135-1628  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Seg Chief Med Off  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 3269.10

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2605708969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. PATTEN, JASON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7384 NARCISSUS LANE N  
 City MAPLE GROVE State MN Zip Code 55311-1596  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Innovation  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2605711969411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

**C. ANDERSONHUTCHINS, LEIGH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16786 RAINY VALE AVE  
 City RIVERSIDE State CA Zip Code 92503-6535  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) CEO Med Grp Non Physn  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2605717869411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	861.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. DAVIS, KELLY, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2023
Mailing Address 2285 N POWHATAN ST			<b>Transaction ID : PR2605734269411</b>
City ARLINGTON	State VA	Zip Code 22205-2113	Amount of Each Receipt this Period 384.60
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) VP Comm	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4038.30	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. LEIGH PITSTICK, EMILY, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2023
Mailing Address 70 SNOW CREEK LN			<b>Transaction ID : PR2605735269411</b>
City LEAVENWORTH	State WA	Zip Code 98826-7802	Amount of Each Receipt this Period 76.92
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Optum Services, Inc		Occupation (for Individual) Dir Ntwk Contrctng	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 846.12	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. PETERSON, ERIC, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2023
Mailing Address 7757 BECK LN			<b>Transaction ID : PR2605750469411</b>
City ZIONSVILLE	State IN	Zip Code 46077-9060	Amount of Each Receipt this Period 76.92
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Optum Services, Inc		Occupation (for Individual) VP Mktg	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 846.12	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	538.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. SONSTEGARD, NATHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4216 ZENITH AVE S  
 City MINNEAPOLIS State MN Zip Code 55410-1413  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Fin  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 808.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2606844469411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. RAWLINSON, DORIEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4795 W RED ROCK DRIVE  
 City LARKSPUR State CO Zip Code 80118-8413  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Ntwk Contrctng  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2606854669411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. FICKER, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 945 MINERS RIDGE COURT  
 City INCLINE VILLAGE State NV Zip Code 89451-8801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Ops  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2607806769411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	133.08
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. WELDON, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1155 MOERS DRIVE  
 City CHASKA State MN Zip Code 55318-4629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Corp Dev  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2608055569411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. LANDO, LISA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 PINEAPPLE STREET APT 3J  
 City BROOKLYN State NY Zip Code 11201-6839  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2608055569411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. PATEL, KETAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1811 PITCAIRN DRIVE  
 City COSTA MESA State CA Zip Code 92626-4702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Pharm Ops  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2612523369411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	230.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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 (UnitedHealth Group PAC)**

**A. STEVENS, J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 133 MEADERBORO ROAD  
 City ROCHESTER State NH Zip Code 03867-4237  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Dir Tech Prod Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2612528569411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. BAKER, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2383 HIGHOVER TRAIL  
 City CHANHASSEN State MN Zip Code 55317-4744  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2612530569411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. SHILTS, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 WOODLAND ROAD  
 City EDINA State MN Zip Code 55424-1631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP CTO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1015.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2612533269411**  
 Amount of Each Receipt this Period 92.30  
 Memo Item  
 P/R Deduction (\$46.15 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	553.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. KIECKHAFFER, REGINA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 28 BINNACLE LANE  
 City KENNEBUNKPORT State ME Zip Code 04046-5434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 294.84

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2612536269411**  
 Amount of Each Receipt this Period 14.04  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. KREJCI, ANDREW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19880 LAKEVIEW AVENUE  
 City EXCELSIOR State MN Zip Code 55331-9352  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Comm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 617.76

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2614310769411**  
 Amount of Each Receipt this Period 56.16  
 Memo Item  
 P/R Deduction (\$28.08 Bi-Weekly)

**C. THOMPSON, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3100 NORTH OCEAN BOULEVARD UNIT 1502  
 City FORT LAUDERDALE State FL Zip Code 33308-7191  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) URS Dir Sls  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2614322369411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	108.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. RHODES, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12439 GLENLIVET LOWLAND AVE  
 City LAS VEGAS State NV Zip Code 89138-6244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Mkt Pres  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2615075169411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

**B. SOLOMON, RANDALL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 760 HAIGHT STREET  
 City SAN FRANCISCO State CA Zip Code 94117-3317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Behvrl Med Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2615671569411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. BIRNBAUM, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 55 DEAN STREET  
 City BROOKLYN State NY Zip Code 11201-6245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Hlthcare Econ  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2615671669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	499.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. SCALLY, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 PLYMOUTH RD  
 City BALTIMORE State MD Zip Code 21229-2213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2615929169411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. KIRBY, WESLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1302 N MALLARD LN  
 City ROGERS State AR Zip Code 72756-1610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Manager, Advisory Svcs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2615957069411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. OSTRANDER, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 BARTON COURT  
 City PLEASANT HILL State CA Zip Code 94523-2029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Comm  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2615960669411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	133.08
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. LONGORIA, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 906 BLUEBIRD  
 City MANCHACA State TX Zip Code 78652-4154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2617361169411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. TRAW, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 518 13TH ST  
 City HUNTINGTON BEACH State CA Zip Code 92648-4038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Cust Service  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2617365669411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. MIKICH, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10004 CHARLEMONT  
 City LAS VEGAS State NV Zip Code 89134-6703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 211.42

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2617928769411**  
 Amount of Each Receipt this Period 19.22  
 Memo Item  
 P/R Deduction (\$9.61 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	124.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <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 (UnitedHealth Group PAC)**

**A. MISKELLCLOUTIER, DOMINIQUE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12101 STRETFORD FOREST COURT  
 City BRISTOW State VA Zip Code 20136-2078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Med Clin Ops  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2618984969411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. DOMB, JULIET, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 116 CHURCH ST  
 City WATERTOWN State MA Zip Code 02472-4721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2115.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2618988769411**  
 Amount of Each Receipt this Period 192.30  
 Memo Item  
 P/R Deduction (\$96.15 Bi-Weekly)

**C. WILSON, JONATHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18242 DOVE COURT  
 City EDEN PRAIRIE State MN Zip Code 55347-1179  
 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 ▼ 833.32

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2618989869411**  
 Amount of Each Receipt this Period 833.32  
 Memo Item  
 P/R Deduction (\$416.66 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1053.70
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. CONNOR, MARSHA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3845 WEST 143RD TERRACE  
 City LEAWOOD State KS Zip Code 66224-3911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Regn Exec Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2618994369411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. OLSON, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 848 S CORONA ST  
 City DENVER State CO Zip Code 80209-4410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) KA VP SIs Acct Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2622561669411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. TROCINSKI, CAROL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1030 ROBIN COURT  
 City WEST SALEM State WI Zip Code 54669-1919  
 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 ▼ 308.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2623691069411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	133.08
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. MOURAS, DENNIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5942 BRIARWOOD COURT  
 City CLARKSTON State MI Zip Code 48346-3176  
 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 ▼ 4230.60

Date of Receipt: 10 / 31 / 2023  
**Transaction ID : PR2623702969411**  
 Amount of Each Receipt this Period: 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. CAMP, MELISSA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 124 WOODFIELD BLVD  
 City MECHANICVILLE State NY Zip Code 12118-3038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Assc Dir Ntwk Contrctng  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt: 10 / 31 / 2023  
**Transaction ID : PR2624436869411**  
 Amount of Each Receipt this Period: 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. GREIN, DEEDREA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6610 XERXES AVE S  
 City EDINA State MN Zip Code 55435-3542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4360.00

Date of Receipt: 10 / 31 / 2023  
**Transaction ID : PR2624442269411**  
 Amount of Each Receipt this Period: 416.00  
 Memo Item  
 P/R Deduction (\$0.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	828.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. MULES, REBECCA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1136 BATTERY AVENUE  
 City BALTIMORE State MD Zip Code 21230-4112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt: 10 / 31 / 2023  
**Transaction ID : PR2624442669411**  
 Amount of Each Receipt this Period: 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. SINGH, KANWAR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10422 VERDI COURT  
 City ELLICOTT CITY State MD Zip Code 21042-2586  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt: 10 / 31 / 2023  
**Transaction ID : PR2624445969411**  
 Amount of Each Receipt this Period: 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. SMITH, LISA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5040 INTERLACHEN BLUFF  
 City EDINA State MN Zip Code 55436-1360  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt: 10 / 31 / 2023  
**Transaction ID : PR2625503769411**  
 Amount of Each Receipt this Period: 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	797.28
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. LIVERS, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 402 DERBY COURT  
 City MEBANE State NC Zip Code 27302-9452  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Exec Dir  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2626346069411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. TERRAL, RECCA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6828 SIMMONS RD  
 City NORTH RICHLAND HILLS State TX Zip Code 76182-4259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2626359669411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. BONAR, BRUCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 STONERIDGE DR  
 City KALISPELL State MT Zip Code 59901-7695  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir, Software Engineering  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2626906869411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	84.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. SCHENCK, ERIK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18236 DOE TRAIL  
 City BRAINERD State MN Zip Code 56401-7987  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Product Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2627730469411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. SCOTT, NICOLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 29039 HOBBLEBUSH  
 City SAN ANTONIO State TX Zip Code 78260-2249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SB KA VP SIs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2627731969411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. MORRIS, BARBARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1045 SWEET GUM WAY  
 City MEBANE State NC Zip Code 27302-6511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Clms  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2627735569411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	84.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. LINDLEY, SHEILA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3656 WINDING WOOD LANE  
 City LEXINGTON State KY Zip Code 40515-1283  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Med Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.80

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2627739869411**  
 Amount of Each Receipt this Period 27.80  
 Memo Item  
 P/R Deduction (\$13.90 Bi-Weekly)

**B. DUKART, JENNIFER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2541 DRESDEN LANE  
 City GOLDEN VALLEY State MN Zip Code 55422-3617  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2627749169411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. NAKAJIMA, KENICHI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15822 BELFAST LANE  
 City HUNTINGTON BEACH State CA Zip Code 92647-3104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Dir Act Svs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 211.42

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2628319069411**  
 Amount of Each Receipt this Period 19.22  
 Memo Item  
 P/R Deduction (\$9.61 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	431.62
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. PARIS, KATHERINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17365 62ND AVE N  
 City MAPLE GROVE State MN Zip Code 55311-6405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2115.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2628320669411**  
 Amount of Each Receipt this Period 192.30  
 Memo Item  
 P/R Deduction (\$96.15 Bi-Weekly)

**B. SHJERVE, NICHOLAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12126 94TH AVE N  
 City MAPLE GROVE State MN Zip Code 55369-7154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Assc Gen Counsel  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2628329869411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. MANNING, KIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12703 DEER CREEK DRIVE  
 City OMAHA State NE Zip Code 68142-1762  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Mktg  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2628331469411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	346.14
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. VANDERWALDE, LAMBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 45 AUDUBON CAUSEWAY  
 City LANTANA State FL Zip Code 33462-4756  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP UHG Research-Corp Affairs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2628332369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. PIAZZA, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 117 HILLSIDE LN  
 City POTTSTOWN State PA Zip Code 19465-8583  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Med Clin Ops  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2628334169411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. KORNHAUSER, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 SUMMIT LANE  
 City BALA CYNWYD State PA Zip Code 19004-2931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Med Dir  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1275.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2628335769411**  
 Amount of Each Receipt this Period 115.92  
 Memo Item  
 P/R Deduction (\$57.96 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	577.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. MILLER, DEBRA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5218 PINEHURST COURT  
 City WHITESTOWN State IN Zip Code 46075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Dir Product  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2628791369411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. THOMPSON, BRUCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2826 HEDGEROW DRIVE  
 City DALLAS State TX Zip Code 75235-7590  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2628833669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. BENJAMIN, GEORGANNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3439 S MILLSPUR WAY  
 City BOISE State ID Zip Code 83716-8648  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2629554169411**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 P/R Deduction (\$15.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	442.68
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. DREFAHL, JASON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6104 FOX MEADOW LN  
 City EDINA State MN Zip Code 55436-1217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Division COO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2632078969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. NAPOLITANO, DIANE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 CHESTNUT COURT  
 City BASKING RIDGE State NJ Zip Code 07920-3100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Dir Capability  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2632087769411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. GORSUCH, KIRSTEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10020 E GRAYTHORN DRIVE  
 City SCOTTSDALE State AZ Zip Code 85262-5134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Comm  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2632087869411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	797.28
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. TUFFIN, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5904 ASHBY MANOR PLACE  
 City ALEXANDRIA State VA Zip Code 22310-2267  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 3653.70

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2632087969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. MEENTS, BENJAMIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6531 BIG WOODS DRIVE  
 City MINNETRISTA State MN Zip Code 55331-2026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Mktg  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2632088169411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. ORRICK, VERONICA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2960 CLAREMORE LANE  
 City LONG BEACH State CA Zip Code 90815-1642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Assc Dir Prov Data  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 280.80

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2632858569411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	489.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. WALTHOUR, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5049 COLFAX AVE S  
 City MINNEAPOLIS State MN Zip Code 55419-1145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Mktg  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2632877069411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. PARR, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2625 LEROY LANE  
 City WEST BLOOMFIELD State MI Zip Code 48324-2237  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Exec Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2632883569411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. SARGENT, GLORIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3750 CANAL STREET  
 City SAINT CHARLES State MO Zip Code 63301-8510  
 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 ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2634119369411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	440.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. HAPGOOD, WADE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 330 NW 82ND  
 City TOPEKA State KS Zip Code 66617-2223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1269.18

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2634167069411**  
 Amount of Each Receipt this Period 115.38  
 Memo Item  
 P/R Deduction (\$57.69 Bi-Weekly)

**B. ROALDI, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4720 HARRIET AVENUE  
 City MINNEAPOLIS State MN Zip Code 55419-5434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Prd  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 847.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2634169569411**  
 Amount of Each Receipt this Period 77.00  
 Memo Item  
 P/R Deduction (\$38.50 Bi-Weekly)

**C. PRIBLE, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1923 SHIVER DR  
 City ALEXANDRIA State VA Zip Code 22307-1629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2634656669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	576.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. SIEVERS, NORA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18605 75TH AVE N  
 City MAPLE GROVE State MN Zip Code 55311-2244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Recruit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2634880969411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

**B. THOMPSON, DUSTIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3037 E BDE MAKA SKA PKWY  
 City MINNEAPOLIS State MN Zip Code 55408-2520  
 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 ▼ 4160.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2634882769411**  
 Amount of Each Receipt this Period 416.00  
 Memo Item  
 P/R Deduction (\$208.00 Bi-Weekly)

**C. WARGIN, AMY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11149 SWEETWATER PATH  
 City WOODBURY State MN Zip Code 55129-5293  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Mktg  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2634883869411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1216.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. WOJCIK, ADAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11424 BOULDER DRIVE  
 City ORLAND PARK State IL Zip Code 60467-7419  
 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 ▼ 4193.03

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2634886569411**  
 Amount of Each Receipt this Period 398.00  
 Memo Item  
 P/R Deduction (\$199.00 Bi-Weekly)

**B. PESCATELLO, SARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1311 HAMLIN STREET NE  
 City WASHINGTON State DC Zip Code 20017-2451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2115.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2634888569411**  
 Amount of Each Receipt this Period 192.30  
 Memo Item  
 P/R Deduction (\$96.15 Bi-Weekly)

**C. POWER, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 SMITH LANE  
 City SAINT JAMES State NY Zip Code 11780-3810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4143.38

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2634892869411**  
 Amount of Each Receipt this Period 424.00  
 Memo Item  
 P/R Deduction (\$212.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1014.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. GILREATH, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 236 JERRY ROAD  
 City EAST HARTFORD State CT Zip Code 06118-3124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Bus Dvlp Cons  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 211.64

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2635426869411**  
 Amount of Each Receipt this Period 19.24  
 Memo Item  
 P/R Deduction (\$9.62 Bi-Weekly)

**B. PAYET, KEITH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26495 SE KENT KANGLEY RD  
 City RAVENSDALE State WA Zip Code 98051-9427  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2635440069411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. MANN, MELISSA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15526 ELM RD  
 City MAPLE GROVE State MN Zip Code 55311-3941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP People Team  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2635442169411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	442.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 222
	<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 (UnitedHealth Group PAC)**

**A. MIRAU, ANTHONY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 770 HAWKCREST CIR  
 City CHANHASSEN State MN Zip Code 55317-4860  
 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 ▼ 2115.30

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2635444269411**  
 Amount of Each Receipt this Period  
 192.30  
 Memo Item  
 P/R Deduction (\$96.15 Bi-Weekly)

**B. CHAPMAN, DANIELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16471 NORTHWOOD RD NW  
 City PRIOR LAKE State MN Zip Code 55372-1615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Segment Controller  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 333.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2635445269411**  
 Amount of Each Receipt this Period  
 333.32  
 Memo Item  
 P/R Deduction (\$166.66 Bi-Weekly)

**C. ROOS, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3199 KAGEN AVE NE  
 City SAINT MICHAEL State MN Zip Code 55376-3416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Chief Acctng Off  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2635451269411**  
 Amount of Each Receipt this Period  
 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	910.22
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. NELSON, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2048 STAGHORN DRIVE  
 City SHAKOPEE State MN Zip Code 55379-5412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) People Business Partner  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2636719369411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. MADONDO, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 WINSTON ROAD  
 City HOLLISTON State MA Zip Code 01746-1454  
 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 ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2636726169411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. DEMPSEY, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6614 PARKWOOD LANE  
 City EDINA State MN Zip Code 55436-1734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Bus Group Fin Leader  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2636726369411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	181.92
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 (UnitedHealth Group PAC)**

**A. HILL, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1800 RIDGE AVENUE UNIT 303  
 City EVANSTON State IL Zip Code 60201-5980  
 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 ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2636726569411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. FELLOWS, CHRISTINA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5725 SAINT JOHNS AVE  
 City EDINA State MN Zip Code 55424-1546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Chief of Staff  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2637680069411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

**C. PEDERSEN, NICHOLAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1862 CLOVER MEADOW DR  
 City CHASKA State MN Zip Code 55318-5400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Comp  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2637684769411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	505.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. LARSON, CHRISTINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3360 VISTA COURT  
 City HASTINGS State MN Zip Code 55033-3347  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 294.84

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2637688769411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. CALABRESE, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12 FARM HILL RD  
 City CAPE ELIZABETH State ME Zip Code 04107-2220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Chief Clin Off  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2639708369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. MESSING, KEITH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 BUTTERFIELD DR  
 City GREENLAWN State NY Zip Code 11740-2001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir, Software Engineering  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2639734969411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	440.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. SMITH, ANTHONY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 ROCKAWAY AVE  
 City MARBLEHEAD State MA Zip Code 01945-1726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Clnt Svc Acct Mgt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2639746269411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. WIGGIN, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 MIDDLEBROOK RD  
 City WEST HARTFORD State CT Zip Code 06119-1014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Comm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1269.18

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2639759369411**  
 Amount of Each Receipt this Period 115.38  
 Memo Item  
 P/R Deduction (\$57.69 Bi-Weekly)

**C. ZUCCO, BETHANY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2608 CROMWELL COURT  
 City MINNEAPOLIS State MN Zip Code 55410-2519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Mktg  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2639760069411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	576.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. DUTTA, SUMIT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1112 W WRIGHTWOOD AVE  
 City CHICAGO State IL Zip Code 60614-1315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Seg Chief Med Off  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2639773869411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. SMITH, DELYLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 447  
 City MT PROSPECT State IL Zip Code 60056-0447  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Director Technology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2639801569411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. GALLOWAY, MERCEDEIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6737 LANCER DRIVE  
 City CHARLOTTE State NC Zip Code 28226-7729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Client Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2640452069411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	489.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 222
	<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 (UnitedHealth Group PAC)**

**A. WEBER, ALISSA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10425 HIDDEN VALLEY DRIVE  
 City JOHNSTON State IA Zip Code 50131-2539  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Bus Group Fin Leader  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1269.18

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2640461069411**  
 Amount of Each Receipt this Period 115.38  
 Memo Item  
 P/R Deduction (\$57.69 Bi-Weekly)

**B. STOW, CHRISTINA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5505 30TH ST NW  
 City WASHINGTON State DC Zip Code 20015-1249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Comm  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2640466469411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. SHARKEY, S PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8607 ELLISTON DRIVE  
 City WYNDMOOR State PA Zip Code 19038-7957  
 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 ▼ 634.70

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2640845469411**  
 Amount of Each Receipt this Period 57.70  
 Memo Item  
 P/R Deduction (\$28.85 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	557.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. BRISSON, SAMUEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2454 GETTYSBURG AVE S  
 City ST LOUIS PARK State MN Zip Code 55426-2345  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Dir Tech Prod Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2640854569411**  
 Amount of Each Receipt this Period 28.00  
 Memo Item  
 P/R Deduction (\$14.00 Bi-Weekly)

**B. ESTESS, SHARON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 128 ASHBROOKE TRAIL  
 City MADISON State MS Zip Code 39110-6855  
 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 ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2640876569411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. METKO, SARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23665 HIGHVIEW LANE  
 City LAKEVILLE State MN Zip Code 55044-6025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP International Tax  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2640877369411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	181.84
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. ADVANI, PROTIMA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7618 BRITTANY PARC CT  
 City FALLS CHURCH State VA Zip Code 22043-2907  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2642024169411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. STRAND, UTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2323 SPRINGDALE DRIVE  
 City NASHVILLE State TN Zip Code 37215-1134  
 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 ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2642025569411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

**C. JENSEN, GINA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6287 JUNEAU LANE N  
 City MAPLE GROVE State MN Zip Code 55311-4166  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Deputy Gen Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2642031469411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	461.52
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. MARTIN, STEPHANIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7002 N VIA DE MANANA  
 City SCOTTSDALE State AZ Zip Code 85258-3951  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) PS Market VP Sls AM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1692.24

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2642818069411**  
 Amount of Each Receipt this Period 153.84  
 Memo Item  
 P/R Deduction (\$76.92 Bi-Weekly)

**B. KIRK, ARETHUSA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16 OTHORIDGE ROAD  
 City LUTHERVILLE State MD Zip Code 21093-5413  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Med Clin Ops  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.66

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2642830269411**  
 Amount of Each Receipt this Period 28.06  
 Memo Item  
 P/R Deduction (\$14.03 Bi-Weekly)

**C. LONG, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4825 PENN AVE S  
 City MINNEAPOLIS State MN Zip Code 55419-5258  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Planning & Strategy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2642831269411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	258.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. FOX, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 611 SECOND STREET  
 City ALEXANDRIA State VA Zip Code 22314-1416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2642832069411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. HASAN, NADIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16731 LAKE STREET EXTENSION  
 City MINNETONKA State MN Zip Code 55345-2745  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Assc Gen Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2071.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2642832969411**  
 Amount of Each Receipt this Period 218.00  
 Memo Item  
 P/R Deduction (\$109.00 Bi-Weekly)

**C. KEISERJENKINS, KAREN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9325 MARTINS LAKE DRIVE  
 City ROSWELL State GA Zip Code 30076-2865  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Mktg Bus Dev  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2642834469411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	630.68
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. RUDOLPH, CLAYTON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4937 RUSSELL AVENUE SOUTH  
 City MINNEAPOLIS State MN Zip Code 55410-1916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Bus Group Fin Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4180.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2643199369411**  
 Amount of Each Receipt this Period 409.70  
 Memo Item  
 P/R Deduction (\$204.85 Bi-Weekly)

**B. CRAGLE, STEVE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6604 MOHAWK TRAIL  
 City EDINA State MN Zip Code 55439-1030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Segment CMO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2643200669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. NEELY, MARC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1159 BUFFALO RIDGE RD  
 City CASTLE PINES State CO Zip Code 80108-8190  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2643203169411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 1178.90  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. WINNEROSKI, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5100 ABBOTT AVE S  
 City MINNEAPOLIS State MN Zip Code 55410-2143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Mktg  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2644647169411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. MCKOY, PHILIP, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 927 LINCOLN AVE  
 City SAINT PAUL State MN Zip Code 55105-3149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Mkt Grp CIO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2644651669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. JEZARIAN, WENDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5251 HUMBOLDT AVE S  
 City MINNEAPOLIS State MN Zip Code 55419-1121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Mktg Rsch Cnslt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2644659669411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	451.14
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. CHAPMAN, GREGORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1724 SECOND STREET  
 City NEW ORLEANS State LA Zip Code 70113-1632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Acct Mgmt SB KA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2645103069411**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 P/R Deduction (\$50.00 Bi-Weekly)

**B. VALLI, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 351 JEFFERSON DRIVE  
 City PITTSBURGH State PA Zip Code 15228-2166  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2645168869411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

**C. MAHRT, JONATHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4640 N TOMSIK ST  
 City LAS VEGAS State NV Zip Code 89129-4816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Segment COO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2645176969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	884.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. PRICE, CASSANDRA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7903 S 193 AVENUE  
 City GRETNA State NE Zip Code 68028-5017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir, Health Plan Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2646263669411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. KELLNER, KYLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1641 WHITE PINE WAY  
 City CARVER State MN Zip Code 55315-4563  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 338.36

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2646268369411**  
 Amount of Each Receipt this Period 30.76  
 Memo Item  
 P/R Deduction (\$15.38 Bi-Weekly)

**C. HOFFMAN, SHERRI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3409 DEEP WILLOW AVENUE  
 City PIKESVILLE State MD Zip Code 21208-3116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Clnt Svc Acct Mgt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2646294669411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	184.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. STANKIEWICZ, DENNIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17761 WEAVER LAKE DRIVE  
 City MAPLE GROVE State MN Zip Code 55311-1328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Corp Controller  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2646304069411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. SWENSSON, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6312 MERRIMAC LANE NORTH  
 City MAPLE GROVE State MN Zip Code 55311-3835  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Segment CMO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2698403969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. ROSENHAUS, MORGANNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 724 FARRAGUT STREET NW  
 City WASHINGTON State DC Zip Code 20011-4012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Found/Social Resp  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1269.18

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2698409869411**  
 Amount of Each Receipt this Period 115.38  
 Memo Item  
 P/R Deduction (\$57.69 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	884.58
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. ZENICK, GEOFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7714 TWISTED OAKS CIRCLE  
 City DALLAS State TX Zip Code 75231-4711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2698410869411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. RODDIS, SARAH ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4512 BRUCE AVENUE  
 City EDINA State MN Zip Code 55424-1121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP User Experience  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.42

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2698413569411**  
 Amount of Each Receipt this Period 19.22  
 Memo Item  
 P/R Deduction (\$9.61 Bi-Weekly)

**C. TAYLOR, JOSHUA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 CARRIAGE HILL RD  
 City WOODBRIDGE State CT Zip Code 06525-1037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2698416769411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	134.60
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. DOWLING, MELODY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 529 N EVERGREEN ST  
 City GARDNER State KS Zip Code 66030-1819  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Med Clin Ops  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2699182569411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. AHLSTROM, ALEXIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3421 OAKWOOD TERRACE  
 City WASHINGTON State DC Zip Code 20010-1819  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2699187169411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. ZHOU, JINGXIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12011 FAIRVIEW CT  
 City MINNETONKA State MN Zip Code 55343-4516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Fin  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2699187869411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	538.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. HECK, DARRYL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 202 CALLAWAY CHASE LN  
 City PANAMA CITY State FL Zip Code 32404-6188  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Manager Data Analytics  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2700831969411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. OFFIELD, MIRANDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1906 N MEYERS RD  
 City LIBERTY LAKE State WA Zip Code 99016-5049  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Manager Data Analytics  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 338.36

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2700857569411**  
 Amount of Each Receipt this Period 30.76  
 Memo Item  
 P/R Deduction (\$15.38 Bi-Weekly)

**C. FULBRIGHT, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 47-645 UAKEA PLACE  
 City KANEOHE State HI Zip Code 96744-5427  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) GP Market Growth Manager  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 270.16

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2700865869411**  
 Amount of Each Receipt this Period 24.56  
 Memo Item  
 P/R Deduction (\$12.28 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	83.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. WARNER, JONATHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 258 CAMBRIDGE DRIVE  
 City RAMSEY State NJ Zip Code 07446-1260  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Clnt Svc Acct Mgt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2700873569411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. WAYLAND, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5601 MATOAKA RD  
 City RICHMOND State VA Zip Code 23226-2329  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Behavioral Hlth  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2700924669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. MCSWEENEY, ERIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1128 EDINGTON PLACE  
 City MARCO ISLAND State FL Zip Code 34145-2006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) EVP Chief People Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2701818069411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	797.28
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 OF 222
	<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 (UnitedHealth Group PAC)**

**A. OCONNELL, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 33 LATIGO PLACE  
 City COLUMBINE VALLEY State CO Zip Code 80123-6683  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2538.36

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2701819669411**  
 Amount of Each Receipt this Period 230.76  
 Memo Item  
 P/R Deduction (\$115.38 Bi-Weekly)

**B. BRUCE, JAMIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1433 POWDER DRIVE  
 City O FALLON State MO Zip Code 63366-1398  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2701823069411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. SPARKS, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10681 S CEDAR NILES BLVD  
 City OLATHE State KS Zip Code 66061-7415  
 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 ▼ 2115.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2701825569411**  
 Amount of Each Receipt this Period 192.30  
 Memo Item  
 P/R Deduction (\$96.15 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	807.66
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 (UnitedHealth Group PAC)**

**A. KRAMER, NANCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4672 BITTERN LANE  
 City LEBANON State OH Zip Code 45036-7562  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Clin Ops  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2702501469411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. BERKE, ETHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4624 TOWER ST  
 City EDINA State MN Zip Code 55424-1549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) CMO/VP Public Health  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2703245269411**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 P/R Deduction (\$40.00 Bi-Weekly)

**C. MERZLICKE, CAREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 950 BENTLEY PARK CIRCLE  
 City O FALLON State MO Zip Code 63368-8022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Fin  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2703246969411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	233.84
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. BROWN, DIANE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 502 BERRYMANS LANE  
 City REISTERSTOWN State MD Zip Code 21136-6003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Clin Pract Perf  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2703250869411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. CRIPPIN, TODD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11328 W 142ND STREET  
 City OVERLAND PARK State KS Zip Code 66221-8060  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Prov Svc  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2703639569411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. WESTRA, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4042 E ROBIN LANE  
 City PHOENIX State AZ Zip Code 85050-6875  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) AES VP SIs Acct Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.66

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2704143469411**  
 Amount of Each Receipt this Period 28.06  
 Memo Item  
 P/R Deduction (\$14.03 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	84.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. HOROHO, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7808 PALMILLA COURT  
 City REUNION State FL Zip Code 34747-6417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Segment CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2704194669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. JOHAR, RAVI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 405 ARGUS MANOR CT  
 City CHESTERFIELD State MO Zip Code 63017-2469  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Med Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2705065169411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**C. DAUN, JESSICA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address W273N6194 BASHAM LANE  
 City SUSSEX State WI Zip Code 53089-4702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Natl VP, Key Accts-Spec Ben  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2705966269411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	440.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. ZELLER, TRISHA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 290 PRESERVE CT  
 City CHANHASSEN State MN Zip Code 55317-8716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Chief of Staff  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2705971469411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. SPADE, NATHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1060 ELLIOTT LANE  
 City YORK State PA Zip Code 17403-3421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1692.24

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2705987069411**  
 Amount of Each Receipt this Period 153.84  
 Memo Item  
 P/R Deduction (\$76.92 Bi-Weekly)

**C. BARBARO, PHILIP, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 670 ARBUTUS STREET  
 City MIDDLETOWN State CT Zip Code 06457-7106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP National Sales  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2705988269411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	566.52
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. KMIEC, ADAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4736 PRAIRIE DUNES WAY  
 City EAGAN State MN Zip Code 55123-2352  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Comm  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2705989269411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. PETRONE, DAMIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 703 DEAN CT  
 City WEST CHESTER State PA Zip Code 19382-2100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Assc Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2706418969411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

**C. BARTHOLET, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5918 VALEWOOD DRIVE  
 City MINNETONKA State MN Zip Code 55345-6545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Tax  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2706451169411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	807.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. MULDOON, ALLISON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 519 E LURAY AVENUE  
 City ALEXANDRIA State VA Zip Code 22301-1605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Govt Affs Dir  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2115.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2706452769411**  
 Amount of Each Receipt this Period 192.30  
 Memo Item  
 P/R Deduction (\$96.15 Bi-Weekly)

**B. MOORE, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9405 EAGLE NEST LANE  
 City MIDDLETON State WI Zip Code 53562-5647  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2706453569411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. MCMAHON, ANDREW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4125 DREW AVENUE SOUTH  
 City MINNEAPOLIS State MN Zip Code 55410-1018  
 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 ▼ 308.66

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2740509069411**  
 Amount of Each Receipt this Period 28.06  
 Memo Item  
 P/R Deduction (\$14.03 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	604.96
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. HUNT, TIMOTHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5594 MARSHALL HOUSE CT  
 City BURKE State VA Zip Code 22015-2141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2740514069411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. WEINBERG, EDWARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 224 N MILL VIEW WAY  
 City PONTE VEDRA BEACH State FL Zip Code 32082-4389  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Unit COO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2740514869411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. DELANEY, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2876 GENEVA ST  
 City DENVER State CO Zip Code 80238-3035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Finance Leader  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2740759269411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	230.76
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 OF 222
	<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 (UnitedHealth Group PAC)**

**A. PONS, NATALIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3209 GALLERIA UNIT 803  
 City EDINA State MN Zip Code 55435-2547  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Chief Compli Off/SD Gen Cnsl  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2740761969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. ALTIERI, DOMINIQUE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6611 HIGHWAY 100  
 City NASHVILLE State TN Zip Code 37205-4226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.66

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2740762569411**  
 Amount of Each Receipt this Period 28.06  
 Memo Item  
 P/R Deduction (\$14.03 Bi-Weekly)

**C. FEHR, STEPHANIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2213 GULF SHORE BLVD N #C-2  
 City NAPLES State FL Zip Code 34102-4643  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) EVP Mkt Grp Chief People Off  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2748020569411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	797.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 181 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. PROCHNO, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4640 ST JAMES GATE  
 City EXCELSIOR State MN Zip Code 55331-9397  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SB KA VP SIs Acct Mgt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2748021969411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. WARD, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22461 ARCADIA BLUFFS  
 City SOUTH LYON State MI Zip Code 48178-8735  
 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 ▼ 294.63

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2749724169411**  
 Amount of Each Receipt this Period 28.06  
 Memo Item  
 P/R Deduction (\$14.03 Bi-Weekly)

**C. SEVERANCE, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2160 N MARION ST  
 City DENVER State CO Zip Code 80205-5245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Med Dir  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2750288169411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	181.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. TAIT, ROBYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 31 LIPTON LANE  
 City LANGHORNE State PA Zip Code 19047-5782  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Product  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 308.88

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2754215969411**  
 Amount of Each Receipt this Period 28.08  
 Memo Item  
 P/R Deduction (\$14.04 Bi-Weekly)

**B. ORIE, TIMOTHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2317 RESIDENCE CIRCLE #B4-102  
 City NAPLES State FL Zip Code 34105-3104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP People Team  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2754244169411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. PAGET, JAMIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15268 LOUISIANA AVE  
 City SAVAGE State MN Zip Code 55378-5654  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2754246069411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	489.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. KONTOR, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 123A SPA VIEW AVE  
 City ANNAPOLIS State MD Zip Code 21401-3542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Advisory Svc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2115.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2754673669411**  
 Amount of Each Receipt this Period 192.30  
 Memo Item  
 P/R Deduction (\$96.15 Bi-Weekly)

**B. BOTHRA, SIDDHARTH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17200 SE 45TH STREET  
 City BELLEVUE State WA Zip Code 98006-6510  
 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 ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2754720769411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. WILSON, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15619 SWANSCOMBE LOOP  
 City UPPER MARLBORO State MD Zip Code 20774-8412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Bus Dvlp  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 422.40

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2755347869411**  
 Amount of Each Receipt this Period 38.40  
 Memo Item  
 P/R Deduction (\$19.20 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	615.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. DONNELLY, ALISON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2127 COTTONWOOD DRIVE  
 City GLENVIEW State IL Zip Code 60026-7771  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Comm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.32

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2755530869411**  
 Amount of Each Receipt this Period 333.32  
 Memo Item  
 P/R Deduction (\$166.66 Bi-Weekly)

**B. ABRAHAM, SANTIAGO, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4320 COTTONWOOD LN  
 City EXCELSIOR State MN Zip Code 55331-9328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Seg CIO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2755652169411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. KRAUTKRAMER, MITCHELL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 800 LAKEVIEW PKWY  
 City MOUND State MN Zip Code 55364-2307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Fin  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2755995769411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	794.84
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. ASHENHURST, KARLA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 865 BRINSMERE DRIVE  
 City ELM GROVE State WI Zip Code 53122-2102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Govt Affs Dir  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1269.18

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2756173669411**  
 Amount of Each Receipt this Period 115.38  
 Memo Item  
 P/R Deduction (\$57.69 Bi-Weekly)

**B. MASONER, AUDREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15400 MAPLE STREET  
 City OVERLAND PARK State KS Zip Code 66223-3262  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir, Health Plan Operations  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2756359869411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. HERMELINGIII, THEODORE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 117 5TH STREET  
 City WILMETTE State IL Zip Code 60091-3405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Mktg Bus Dev  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2756521669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	576.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. TANG, SHI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 142 WOOSTER STREET  
APT 3B

City NEW YORK State NY Zip Code 10012-3195

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Innovation & Strategy

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3744.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2756690669411**

Amount of Each Receipt this Period 416.00

Memo Item

P/R Deduction (\$208.00 Bi-Weekly)

**B. SATTERWHITE, ERIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1722 MONUMENT STREET

City CONCORD State MA Zip Code 01742-5310

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Gen Mgmt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4196.46

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2757435769411**

Amount of Each Receipt this Period 396.00

Memo Item

P/R Deduction (\$198.00 Bi-Weekly)

**C. BARTLES, SARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25263 RODEO LANE

City PARMA State ID Zip Code 83660-7107

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Beh Affordability, Assc Dir

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 308.66

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2759243369411**

Amount of Each Receipt this Period 28.06

Memo Item

P/R Deduction (\$14.03 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 840.06

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. AZAM, MISHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 629 JEFFERSON AVENUE  
 City CHERRY HILL State NJ Zip Code 08002-3704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 847.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2759343869411**  
 Amount of Each Receipt this Period 77.00  
 Memo Item  
 P/R Deduction (\$38.50 Bi-Weekly)

**B. HUNT, BRITTNEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7820 JARED WAY  
 City TALLAHASSEE State FL Zip Code 32309-8110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2759756469411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. SCHLAIFER, MARISSA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 N STUART ST #400  
 City ARLINGTON State VA Zip Code 22201-5727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Regl Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2759756869411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	538.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. DIFRONZO, CHRISTINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 CRAIG LN  
 City HINGHAM State MA Zip Code 02043-3411  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Analytics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2759978169411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. KELLOGG, PETER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1515 JEFFERSON AVENUE  
 City NEW ORLEANS State LA Zip Code 70115-4120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Assc Gen Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2759984169411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. ROBERT, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 79373 FITZGERALD CHURCH ROAD  
 City COVINGTON State LA Zip Code 70435-7809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Compli  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2759986069411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	230.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. REYNOLDS, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 106 SE 68TH STREET  
 City OAK ISLAND State NC Zip Code 28465-4549  
 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 ▼ 2428.45

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2760046369411**  
 Amount of Each Receipt this Period 285.70  
 Memo Item  
 P/R Deduction (\$142.85 Bi-Weekly)

**B. ALTMAN, KIMBERLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1861 TRANQUILITY COURT  
 City PROSPER State TX Zip Code 75078-9744  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Clint Svc Acct Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4160.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2760046569411**  
 Amount of Each Receipt this Period 416.00  
 Memo Item  
 P/R Deduction (\$208.00 Bi-Weekly)

**C. DECKER, WYATT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1482 HUNTER DRIVE  
 City WAYZATA State MN Zip Code 55391-9658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) EVP Chief Phys, Innov & VBC  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2760134069411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1086.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 190 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. MASTEN, DALE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9845 BENNINGTON DRIVE  
 City SHARONVILLE State OH Zip Code 45241-3619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir Regl Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2760775869411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. DELMONICO, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12 MULBERRY CIRCLE  
 City JOHNSTON State RI Zip Code 02919-2519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Assc Gen Counsel  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2538.36

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2760781769411**  
 Amount of Each Receipt this Period 230.76  
 Memo Item  
 P/R Deduction (\$115.38 Bi-Weekly)

**C. CRAWFORD, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 744 SHELLEY LANE  
 City FRANKLIN State TN Zip Code 37064-1621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2538.36

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2760825169411**  
 Amount of Each Receipt this Period 230.76  
 Memo Item  
 P/R Deduction (\$115.38 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	846.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. VELASCO, JOEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6352 31 PLACE NW ST  
 City WASHINGTON State DC Zip Code 20015-2358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Intl Relations  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2760938569411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. MILLER, CORINNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6083 OLD BRICKSTORE ROAD  
 City GREENSBORO State NC Zip Code 27455-8335  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2761090069411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

**C. OBRIEN, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11017 CAVELL CIR  
 City BLOOMINGTON State MN Zip Code 55438-2284  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Dir Tax  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1057.54

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2761138269411**  
 Amount of Each Receipt this Period 96.14  
 Memo Item  
 P/R Deduction (\$48.07 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	519.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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 (UnitedHealth Group PAC)**

**A. ZITO, MOLLIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2445 WEST LOGAN BLVD  
 UNIT 3E  
 City CHICAGO State IL Zip Code 60647-2043  
 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 ▼ 211.42

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2762092869411**  
 Amount of Each Receipt this Period 19.22  
 Memo Item  
 P/R Deduction (\$9.61 Bi-Weekly)

**B. ARYA, RAJIV, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 GALWAY ROAD  
 City SKILLMAN State NJ Zip Code 08558-1731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Sr Director, Advisory Svcs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2762648769411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**C. SONNIER, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 DEMONBREUN ST UNIT 1805  
 City NASHVILLE State TN Zip Code 37201-2248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Mktg Bus Dev  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2538.36

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2762649969411**  
 Amount of Each Receipt this Period 230.76  
 Memo Item  
 P/R Deduction (\$115.38 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	326.90
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. CLAYTON, JUSTIN, , ,</b>			Date of Receipt 10 / 31 / 2023 <b>Transaction ID : PR2762749969411</b>
Mailing Address 163 BRIER RIDGE DRIVE			Amount of Each Receipt this Period 153.84
City DURHAM	State NC	Zip Code 27703-0339	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Dir Govt Affs	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1692.24		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. BIDINGER, DANIEL, , ,</b>			Date of Receipt 10 / 31 / 2023 <b>Transaction ID : PR2762957569411</b>
Mailing Address 3757 INDEPENDENCE RD			Amount of Each Receipt this Period 40.00
City MAPLE PLAIN	State MN	Zip Code 55359-9759	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Chief of Staff	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. DAVIS, JENNIFER, , ,</b>			Date of Receipt 10 / 31 / 2023 <b>Transaction ID : PR2763180369411</b>
Mailing Address 4330 CROWN POINT DR			Amount of Each Receipt this Period 96.14
City COLUMBUS	State OH	Zip Code 43220-4424	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Dir Govt Affs	P/R Deduction (\$48.07 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1057.54		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	289.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. LAUSCH, KERSTEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 236 E NEWELL STREET  
 City WINTER GARDEN State FL Zip Code 34787-2800  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.66

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2767047769411**  
 Amount of Each Receipt this Period 28.06  
 Memo Item  
 P/R Deduction (\$14.03 Bi-Weekly)

**B. MEYER, ALEXIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4732 EWING AVENUE SOUTH  
 City MINNEAPOLIS State MN Zip Code 55410-1746  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Chief of Staff  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.32

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2767552269411**  
 Amount of Each Receipt this Period 333.32  
 Memo Item  
 P/R Deduction (\$166.66 Bi-Weekly)

**C. FOLEY, BARBARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6260 BLACK FOX WAY  
 City TALLAHASSEE State FL Zip Code 32312-4504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Mktg Bus Dev  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1015.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2769239269411**  
 Amount of Each Receipt this Period 92.30  
 Memo Item  
 P/R Deduction (\$46.15 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	453.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. OBARSKI, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2035 S CLARKSON ST  
 City DENVER State CO Zip Code 80210-4105  
 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 **338.36**

Date of Receipt **10 / 31 / 2023**  
**Transaction ID : PR2769243969411**  
 Amount of Each Receipt this Period **30.76**  
 Memo Item  
 P/R Deduction (\$15.38 Bi-Weekly)

**B. MOORE, MALVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4520 SUNSET RIDGE  
 City MINNEAPOLIS State MN Zip Code 55416-3333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Found/Social Resp  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **308.66**

Date of Receipt **10 / 31 / 2023**  
**Transaction ID : PR2769866469411**  
 Amount of Each Receipt this Period **28.06**  
 Memo Item  
 P/R Deduction (\$14.03 Bi-Weekly)

**C. HAUSMAN, ERIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1617 WEST 25TH STREET  
 City MINNEAPOLIS State MN Zip Code 55405-2466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Comm  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **4230.60**

Date of Receipt **10 / 31 / 2023**  
**Transaction ID : PR2778612769411**  
 Amount of Each Receipt this Period **384.60**  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>443.42</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. ARTHUR, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2300 NAUDAIN ST  
 UNIT W  
 City PHILADELPHIA State PA Zip Code 19146-1172  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Ops  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3181.78

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2778850869411**  
 Amount of Each Receipt this Period 909.08  
 Memo Item  
 P/R Deduction (\$454.54 Bi-Weekly)

**B. BAKER, OMAR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8100 SPRING HILL FARM DR  
 City MCLEAN State VA Zip Code 22102-2330  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) CMO/SVP Strat Intv  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2778986669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. ROMANOW, KATHLEEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6804 MARBURY ROAD  
 City BETHESDA State MD Zip Code 20817-6052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Govt Affs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2115.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2782733069411**  
 Amount of Each Receipt this Period 192.30  
 Memo Item  
 P/R Deduction (\$96.15 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1485.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. SABAL, PETER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6151 WILLOW ROCK ST  
 City LAS VEGAS State NV Zip Code 89135-1482  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Gen Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 846.12

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2783559969411**  
 Amount of Each Receipt this Period 76.92  
 Memo Item  
 P/R Deduction (\$38.46 Bi-Weekly)

**B. MOYER, CASEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7568 W SNOWBERRY  
 City BOISE State ID Zip Code 83709-1674  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Dir, Software Engineering  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 338.36

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2783746869411**  
 Amount of Each Receipt this Period 30.76  
 Memo Item  
 P/R Deduction (\$15.38 Bi-Weekly)

**C. BRADY, NICOLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address N7623 OLSON RD  
 City ONEIDA State WI Zip Code 54155-9619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Sr Med Dir  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.66

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2786671269411**  
 Amount of Each Receipt this Period 28.06  
 Memo Item  
 P/R Deduction (\$14.03 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	135.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. OWEN, CHRISTOPHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9011 LESLIES GATE  
 City BOERNE State TX Zip Code 78015-4779  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Mktg  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2786908669411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**B. CONWAY, PATRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 190 WINDING RIVER RD  
 City WELLESLEY State MA Zip Code 02482-7320  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Segment CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2787875569411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. CLARKE, LACEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 MILO STREET  
 City HUDSON State NY Zip Code 12534-2722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Govt Affs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1692.24

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2789668269411**  
 Amount of Each Receipt this Period 153.84  
 Memo Item  
 P/R Deduction (\$76.92 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	923.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 222
	<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 (UnitedHealth Group PAC)**

**A. MORDEN, NANCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4624 TOWER ST  
 City EDINA State MN Zip Code 55424-1549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) NA Med Dir/CMO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 840.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2790158669411**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 P/R Deduction (\$40.00 Bi-Weekly)

**B. FISHER, HEIDI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40 SPYGLASS PLACE  
 City DELLWOOD State MN Zip Code 55110-1250  
 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 ▼ 4160.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2790274369411**  
 Amount of Each Receipt this Period 416.00  
 Memo Item  
 P/R Deduction (\$208.00 Bi-Weekly)

**C. BILLS, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18961 DEVONSHIRE ST  
 City BEVERLY HILLS State MI Zip Code 48025-4031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Clnt Svc Acct Mgt  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1015.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2790558769411**  
 Amount of Each Receipt this Period 92.30  
 Memo Item  
 P/R Deduction (\$46.15 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	588.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. SEGERMAN, ANDREW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7306 REDBRIDGE CT  
 City SPRINGFIELD State VA Zip Code 22153-1511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Comm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2791475869411**  
 Amount of Each Receipt this Period 38.46  
 Memo Item  
 P/R Deduction (\$19.23 Bi-Weekly)

**B. HAINES, CAROL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 203 NESHAMINY ROAD  
 City CROYDON State PA Zip Code 19021-5427  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Med Clin Ops  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2791476969411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

**C. SMITH, TAMEEKA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12201 CAPWELL DRIVE  
 City MIDLOTHIAN State VA Zip Code 23113-2002  
 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 ▼ 4230.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : PR2791832969411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	823.06
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. BRADY, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5110 ALVARADO LAN N  
 City PLYMOUTH State MN Zip Code 55446-3063  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP, Medicare STARS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2794131669411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

**B. MORSE, SARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6398 VALE STREET  
 City ALEXANDRIA State VA Zip Code 22312-1435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4230.60

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2794473469411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

**C. TOWSLEY, JACK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10210 SAN FRANCISCO RD NE  
 City ALBUQUERQUE State NM Zip Code 87122-3452  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) CEO Med Grp Non Physn  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2795226469411**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 P/R Deduction (\$40.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	864.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 202 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. SMOTER, JENNIFER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 570 LANDSDOWNE LANE  
 City LAKE BLUFF State IL Zip Code 60044-2818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP Chief Comm Off  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.66

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2796989069411**  
 Amount of Each Receipt this Period 1666.66  
 Memo Item  
 P/R Deduction (\$833.33 Bi-Weekly)

**B. SHUCK, CYNTHIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11204 RANNOCH LANE  
 City LOUISVILLE State KY Zip Code 40243-1238  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Acct Cnslt Pharmacist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 298.62

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2797113469411**  
 Amount of Each Receipt this Period 33.18  
 Memo Item  
 P/R Deduction (\$16.59 Bi-Weekly)

**C. ALBERT, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5365 CEDAR POINT RD  
 City MINNETRISTA State MN Zip Code 55364-9394  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) VP Gen Auditor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4038.30

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2805722369411**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 P/R Deduction (\$192.30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2084.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. VINYARD, ANDREA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4019 E MITCHELL DR  
 City PHOENIX State AZ Zip Code 85018-5911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Behavioral Health  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2805726169411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

**B. MILLAR, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1101 BAYBERRY DRIVE  
 City CHAPEL HILL State NC Zip Code 27517-9113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Industry Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2816690369411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

**C. WALTHALL, TODD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1948 ROCKINGHAM ST  
 City MCLEAN State VA Zip Code 22101-4922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Unit CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2817960469411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. EINODSHOFER, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11 WILLOW LINKS DR  
 City BELLE VERNON State PA Zip Code 15012-4334  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) VP Pharmacy Programs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2817961469411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

**B. SCHWARTZ, ERICA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5935 PREMIER WAY UNIT 1425  
 City NAPLES State FL Zip Code 34109-7903  
 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 ▼ 4200.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2818047669411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

**C. ALEJANDRE, CYNTHIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 708 BERNINI STREET  
 City LAS VEGAS State NV Zip Code 89144-4038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Govt Affs Dir  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2821668469411**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 P/R Deduction (\$50.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 205 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. NEUSTADT, JENNAE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 115 KEYSTONE CROSSING DR  
 City O FALLON State MO Zip Code 63368-6777  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Govt Affs Dir  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1909.04

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2821993369411**  
 Amount of Each Receipt this Period 545.44  
 Memo Item  
 P/R Deduction (\$272.72 Bi-Weekly)

**B. BECHAN, ANGELA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 MCVICKERS LANE  
 City MENDHAM State NJ Zip Code 07945-2936  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) SVP Comm  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 3906.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2822501469411**  
 Amount of Each Receipt this Period 434.00  
 Memo Item  
 P/R Deduction (\$217.00 Bi-Weekly)

**C. KISLOFF, MICHELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1815 N UNDERWOOD ST  
 City ARLINGTON State VA Zip Code 22205-1819  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Bus Segment Gen Counsel  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4160.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2823340569411**  
 Amount of Each Receipt this Period 416.00  
 Memo Item  
 P/R Deduction (\$208.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1395.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 206 OF 222
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

**A. MINOR, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3932 CHAPEL HEIGHTS DRIVE  
 City MARIETTA State GA Zip Code 30062-2217  
 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 ▼ 4160.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2823660869411**  
 Amount of Each Receipt this Period 416.00  
 Memo Item  
 P/R Deduction (\$208.00 Bi-Weekly)

**B. SCHOENEBECK, DARCEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 804 ECLIPSE PKWY  
 City NEW PRAGUE State MN Zip Code 56071-2015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Chief Client Officer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4123.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2824394769411**  
 Amount of Each Receipt this Period 434.00  
 Memo Item  
 P/R Deduction (\$217.00 Bi-Weekly)

**C. VISWANATHAN, KARTHIK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 CARAWAY CT  
 City SAN RAMON State CA Zip Code 94582-5027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Chief Digital Svs Off  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : PR2826678969411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 207 OF 222
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 (UnitedHealth Group PAC)**

**A. GLEASON, LAUREN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1607 BLOUIN AVE  
 City BATON ROUGE State LA Zip Code 70808-1408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Dir Govt Affs  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 954.52

Date of Receipt **10 / 31 / 2023**  
**Transaction ID : PR2827270869411**  
 Amount of Each Receipt this Period 272.72  
 Memo Item  
 P/R Deduction (\$136.36 Bi-Weekly)

**B. HUMMEL, KRISTI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 EDEN CIRCLE  
 City WESTBOROUGH State MA Zip Code 01581-3653  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) SVP, Talent  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4200.00

Date of Receipt **10 / 31 / 2023**  
**Transaction ID : PR2827479669411**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 P/R Deduction (\$200.00 Bi-Weekly)

**C. LOCKE, ELLEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 732 SOUTH ALFRED STREET  
 City ALEXANDRIA State VA Zip Code 22314-4004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) United HealthCare Services Inc Occupation (for Individual) Govt Affs Dir  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 792.45

Date of Receipt **10 / 31 / 2023**  
**Transaction ID : PR2831507069411**  
 Amount of Each Receipt this Period 105.66  
 Memo Item  
 P/R Deduction (\$52.83 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	778.38
<b>TOTAL</b> This Period (last page this line number only).....	126512.45

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Manchin For West Virginia**

Mailing Address PO Box 5202

City  
Charleston

State  
WV

Zip Code  
25361

Purpose of Disbursement

Contribution

011

Candidate Name

Manchin, Joe, , Sen., III

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  General  
 Other (specify) ▼

State: WV

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	9		2	0	2	3		

FEC Identification Number

C00486563

**Transaction ID : 49250617**

Amount of Each Disbursement this Period

5000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. All For Our Country Leadership PAC**

Mailing Address 600 Pennsylvania Avenue SE  
#15180

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement

Contribution

011

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	9		2	0	2	3		

FEC Identification Number

C00629212

**Transaction ID : 49250618**

Amount of Each Disbursement this Period

5000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Cotton For Senate, Inc.**

Mailing Address PO Box 7839

City  
Little Rock

State  
AR

Zip Code  
72217

Purpose of Disbursement

Contribution

011

Candidate Name

Cotton, Thomas, , Sen.,

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2026

 Primary  General  
 Other (specify) ▼

State: AR

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	9		2	0	2	3		

FEC Identification Number

C00499988

**Transaction ID : 49250620**

Amount of Each Disbursement this Period

2500.00

Memo Item Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

12500.00

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



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Alaskans For Dan Sullivan**

Mailing Address 3705 Arctic Blvd #447

City Anchorage State AK Zip Code 99503

Purpose of Disbursement

Contribution

011

Candidate Name

Sullivan, Daniel, , Sen.,

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2026  Primary  General  Other (specify) ▼

State: AK District:

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2023

FEC Identification Number

C C00570994

**Transaction ID : 49250621**

Amount of Each Disbursement this Period

2000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Ann Wagner for Congress**

Mailing Address PO Box 50

City Ballwin State MO Zip Code 63022

Purpose of Disbursement

Contribution

011

Candidate Name

Wagner, Ann, L., Rep.,

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify)

State: MO District: 02

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2023

FEC Identification Number

C C00495846

**Transaction ID : 49250624**

Amount of Each Disbursement this Period

5000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Wild and Wonderful PAC**

Mailing Address 3538 South Wakefield Street

City Arlington State VA Zip Code 22206

Purpose of Disbursement

Contribution

011

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2023

FEC Identification Number

C C00489336

**Transaction ID : 49250625**

Amount of Each Disbursement this Period

2500.00

Memo Item Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

9500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Truth Is Markets Work Fund A/K/A Tim W Fund**

Mailing Address PO Box 2485

City  
Springfield

State  
VA

Zip Code  
22152

Purpose of Disbursement

Contribution

011

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2023			

FEC Identification Number

C C00498360

**Transaction ID : 49250626**

Amount of Each Disbursement this Period

2500.00
---------

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Tomorrow is Meaningful PAC**

Mailing Address 7620 Rivers Ave  
Ste. 370 #312

City  
North Charleston

State  
SC

Zip Code  
29406

Purpose of Disbursement

Contribution

011

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2023			

FEC Identification Number

C C00495887

**Transaction ID : 49250627**

Amount of Each Disbursement this Period

5000.00
---------

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Wild and Wonderful PAC**

Mailing Address 3538 South Wakefield Street

City  
Arlington

State  
VA

Zip Code  
22206

Purpose of Disbursement

Contribution

011

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2023			

FEC Identification Number

C C00489336

**Transaction ID : 49250628**

Amount of Each Disbursement this Period

2500.00
---------

Memo Item Contribution

**SUBTOTAL** of Disbursements This Page (optional).....▶

10000.00
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**TOTAL** This Period (last page this line number only).....▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Leadership and Accountability are National Keys PAC**

Mailing Address PO Box 1639

City  
Bethany

State  
OK

Zip Code  
73008

Purpose of Disbursement

Contribution

011

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2023			

FEC Identification Number

C C00492058

**Transaction ID : 49250629**

Amount of Each Disbursement this Period

5000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Lead Encourage Elect PAC**

Mailing Address PO Box 183

City  
Hudson

State  
WI

Zip Code  
54016

Purpose of Disbursement

Contribution

011

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2023			

FEC Identification Number

C C00494302

**Transaction ID : 49250630**

Amount of Each Disbursement this Period

2500.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Heartland Values PAC**

Mailing Address PO Box 505

City  
Sioux Falls

State  
SD

Zip Code  
57101

Purpose of Disbursement

Contribution

011

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2023			

FEC Identification Number

C C00409003

**Transaction ID : 49250632**

Amount of Each Disbursement this Period

2500.00

Memo Item Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

10000.00

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



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Building Bridges PAC**

Mailing Address PO Box 12056

City  
Lansing

State  
MI

Zip Code  
48901

Purpose of Disbursement

Contribution

011

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2023			

FEC Identification Number

C [Redacted]

**Transaction ID : 49144603**

Amount of Each Disbursement this Period

10000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Jim Pillen for Governor**

Mailing Address 4438 Old Mill Court

City  
Columbus

State  
NE

Zip Code  
68601

Purpose of Disbursement

Contribution

011

Candidate Name

Pillen, Jim, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2023			

FEC Identification Number

C [Redacted]

**Transaction ID : 49144605**

Amount of Each Disbursement this Period

5000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Ben Hansen for Legislature**

Mailing Address 540 S. 17th Street

City  
Blair

State  
NE

Zip Code  
68008

Purpose of Disbursement

Contribution

011

Candidate Name

Hansen, Ben, , NE Sen.,

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2023			

FEC Identification Number

C [Redacted]

**Transaction ID : 49144606**

Amount of Each Disbursement this Period

1500.00

Memo Item Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

16500.00

[Redacted]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Mike Jacobson for Legislature**

Mailing Address 18326 S Charles Avenue

City  
North Platte

State  
NE

Zip Code  
69101

Purpose of Disbursement

Contribution

011

Candidate Name

Jacobson, Michael, , NE Sen.,

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 49144607

Amount of Each Disbursement this Period

[REDACTED] 1250.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Ballard for Nebraska**

Mailing Address 6801 NW 2nd Street

City  
Lincoln

State  
NE

Zip Code  
68521

Purpose of Disbursement

Contribution

011

Candidate Name

Ballard, Beau, , NE Sen.,

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 49144609

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Eliot Bostar for Legislature**

Mailing Address 3800 S 42nd Street

City  
Lincoln

State  
NE

Zip Code  
68506

Purpose of Disbursement

Contribution

011

Candidate Name

Bostar, Eliot, , NE Sen.,

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 49144610

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 3250.00

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. George for Nebraska**

Mailing Address 5643 Walker Avenue

City  
Lincoln

State  
NE

Zip Code  
68507

Purpose of Disbursement

Contribution

011

Candidate Name

Dungan, George, , NE Sen., III

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : 49144611

Amount of Each Disbursement this Period

[REDACTED] 750.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Committee to Elect Kathleen Kauth**

Mailing Address 6103 S 178th Street

City  
Omaha

State  
NE

Zip Code  
68135

Purpose of Disbursement

Contribution

011

Candidate Name

Kauth, Kathleen, , NE Sen.,

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : 49144612

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Von Gillern for Nebraska**

Mailing Address 18370 Honeysuckle Drive

City  
Elkhorn

State  
NE

Zip Code  
68022

Purpose of Disbursement

Contribution

011

Candidate Name

Von Gillern, Brad, , NE Sen.,

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : 49144614

Amount of Each Disbursement this Period

[REDACTED] 750.00

Memo Item Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 2500.00

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Hardin for Legislature**

Mailing Address 2770 Clubhouse Drive

City Gering State NE Zip Code 69341

Purpose of Disbursement

Contribution

011

Candidate Name

Hardin, Brian, , NE Sen.,

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [Redacted]

Transaction ID : 49144616

Amount of Each Disbursement this Period

[Redacted] 1250.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Jen Day for Nebraska**

Mailing Address 15708 Redwood Street

City Omaha State NE Zip Code 68136

Purpose of Disbursement

Contribution

011

Candidate Name

Day, Jen, , NE Sen.,

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [Redacted]

Transaction ID : 49144617

Amount of Each Disbursement this Period

[Redacted] 1000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Ray Aguilar for Legislature**

Mailing Address 55A Kuester Lake

City Grand Island State NE Zip Code 68801

Purpose of Disbursement

Contribution

011

Candidate Name

Aguilar, Raymond, , NE Sen.,

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [Redacted]

Transaction ID : 49144618

Amount of Each Disbursement this Period

[Redacted] 1000.00

Memo Item Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[Redacted] 3250.00

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

[Redacted]



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Nebraskans for Loren Lippincott**

Mailing Address 2611 Hwy 14

City Central City State NE Zip Code 68826

Purpose of Disbursement

Contribution

011

Candidate Name

Lippincott, Loren, , NE Sen.,

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 49144619

Amount of Each Disbursement this Period

[REDACTED] 750.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Robert Dover for Nebraska**

Mailing Address 1000 W Norfolk Avenue

City Norfolk State NE Zip Code 68701

Purpose of Disbursement

Contribution

011

Candidate Name

Dover, Robert, , NE Sen.,

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 49144621

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Riepe for Nebraska**

Mailing Address 6232 S 79th Circle

City Ralston State NE Zip Code 68127

Purpose of Disbursement

Contribution

011

Candidate Name

Riepe, Merv, , NE Sen.,

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 49144622

Amount of Each Disbursement this Period

[REDACTED] 750.00

Memo Item Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 2500.00

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Citizens to Elect John Arch**

Mailing Address 8614 S 100th Street

City La Vista State NE Zip Code 68128

Purpose of Disbursement  
Contribution  011  
Candidate Name  
Arch, John, , NE Sen.,  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  
 Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y  
10 / 02 / 2023

FEC Identification Number  
C  
Transaction ID : 49144625  
Amount of Each Disbursement this Period  
1250.00  
Contribution  
 Memo Item

Full Name (Last, First, Middle Initial)

**B. Julie Slama for Legislature**

Mailing Address 73424 645A Avenue

City Peru State NE Zip Code 68421

Purpose of Disbursement  
Contribution  011  
Candidate Name  
Slama, Julie, E., NE Sen.,  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  
 Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y  
10 / 02 / 2023

FEC Identification Number  
C  
Transaction ID : 49144626  
Amount of Each Disbursement this Period  
2000.00  
Contribution  
 Memo Item

Full Name (Last, First, Middle Initial)

**C. Rob Clements for Legislature**

Mailing Address PO Box 198

City Elmwood State NE Zip Code 68349

Purpose of Disbursement  
Contribution  011  
Candidate Name  
Clements, Robert, , NE Sen.,  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  
 Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y  
10 / 02 / 2023

FEC Identification Number  
C  
Transaction ID : 49144627  
Amount of Each Disbursement this Period  
1000.00  
Contribution  
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

4250.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Friends of Christy Armendariz**

Mailing Address 16212 West Maple Road

City Omaha State NE Zip Code 68116

Purpose of Disbursement

Contribution

011

Candidate Name

Armendariz, Christy, , NE Sen.,

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [Redacted]

Transaction ID : 49144628

Amount of Each Disbursement this Period

[Redacted] 750.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Jay Costa Jr. for State Senate**

Mailing Address 314 Newport Road

City Pittsburgh State PA Zip Code 15221

Purpose of Disbursement

Contribution

011

Candidate Name

Costa, Jay, , PA Sen., Jr.

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [Redacted]

Transaction ID : 49236487

Amount of Each Disbursement this Period

[Redacted] 5000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Friends of Kevin Boyle**

Mailing Address 8035 Burholme Avenue

City Philadelphia State PA Zip Code 19111

Purpose of Disbursement

Contribution

011

Candidate Name

Boyle, Kevin, , PA Rep.,

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [Redacted]

Transaction ID : 49236489

Amount of Each Disbursement this Period

[Redacted] 2000.00

Memo Item Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[Redacted] 7750.00

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

[Redacted]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Friends of Joanna McClinton**

Mailing Address PO Box 16668

City Philadelphia

State PA

Zip Code 19139

Purpose of Disbursement

Contribution

011

Candidate Name

McClinton, Joanna, E., PA Rep.,

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 10 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : 49236492

Amount of Each Disbursement this Period

[REDACTED] 3000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Friends of Glen Mulready, 2022**

Mailing Address 7331 S Olympia Ave #320

City Tulsa

State OK

Zip Code 74132

Purpose of Disbursement

Void - Friends of Glen Mulready, 2022; Check Dated 08/14/2023

011

Candidate Name

Mulready, Glen, , Commission,

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 10 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : 49236650

Amount of Each Disbursement this Period

[REDACTED] - 2500.00

Memo Item Void - Friends of Glen Mulready, 2022; Check Dated 08/14/2023

Full Name (Last, First, Middle Initial)

**C. Friends of Nick Miller**

Mailing Address PO Box 1799

City Allentown

State PA

Zip Code 18105

Purpose of Disbursement

Contribution

011

Candidate Name

Miller, Nick, , PA Sen.,

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 11 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : 49236905

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 1500.00

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Lynch For Colorado**

Mailing Address 5962 Pawnee Court

City Wellington State CO Zip Code 80549

Purpose of Disbursement

Contribution

011

Candidate Name

Lynch, Mike, , CO Rep.,

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2023			

FEC Identification Number

C [ ]

Transaction ID : 49250610

Amount of Each Disbursement this Period

[ ] 225.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Lynch For Colorado**

Mailing Address 5962 Pawnee Court

City Wellington State CO Zip Code 80549

Purpose of Disbursement

Contribution

011

Candidate Name

Lynch, Mike, , CO Rep.,

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2023			

FEC Identification Number

C [ ]

Transaction ID : 49250611

Amount of Each Disbursement this Period

[ ] 225.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Mark Tedford for State Representative 2024**

Mailing Address 9175 S. Yale Avenue, Suite 140

City Tulsa State OK Zip Code 74137

Purpose of Disbursement

Contribution

011

Candidate Name

Tedford, Mark, , OK Rep.,

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2023			

FEC Identification Number

C [ ]

Transaction ID : 49250612

Amount of Each Disbursement this Period

[ ] 1500.00

Memo Item Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[ ] 1950.00

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

[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)**

Full Name (Last, First, Middle Initial)

**A. Josh Cantrell for State House 2022**

Mailing Address 802 N. Marshall

City  
Kingston

State  
OK

Zip Code  
73439

Purpose of Disbursement

Contribution

011

Candidate Name

Cantrell, Josh, , OK Rep.,

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			19			2023					

FEC Identification Number

C

Transaction ID : 49250614

Amount of Each Disbursement this Period

1000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**B. Friends of Steve Bashore 2024**

Mailing Address 1025 McKinley St.

City  
Miami

State  
OK

Zip Code  
74354

Purpose of Disbursement

Contribution

011

Candidate Name

Bashore, Steve, , OK Rep.,

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			19			2023					

FEC Identification Number

C

Transaction ID : 49250616

Amount of Each Disbursement this Period

1000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

**C. Friends of Mike Hilgers**

Mailing Address 1320 Lincoln Mall

City  
Lincoln

State  
NE

Zip Code  
68508

Purpose of Disbursement

Contribution

011

Candidate Name

Hilgers, Mike, , ,

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			24			2023					

FEC Identification Number

C

Transaction ID : 49256086

Amount of Each Disbursement this Period

5000.00

Memo Item Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

7000.00

50450.00